

Safety Groups Program

Application Form - Northern Ontario Safety Group

Yes, as the owner/senior manager, I would like to apply on behalf of my company to participate in the Safety Group Program for 2015.

Firm (full name): <input style="width: 100%;" type="text"/>			
Parent Company (if any): <input style="width: 100%;" type="text"/>			
WSIB Account Number: <input style="width: 100%;" type="text"/>		WSIB Firm Number: <input style="width: 100%;" type="text"/>	
Annual WSIB Premium: <input style="width: 100%;" type="text"/>	Number of Employees: <input style="width: 100%;" type="text"/>	Union <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes , state union name <input style="width: 100%;" type="text"/>
Address <input style="width: 100%;" type="text"/>			
City/Town: <input style="width: 100%;" type="text"/>		Province <input style="width: 100%;" type="text"/>	Postal Code <input style="width: 100%;" type="text"/>
Contact Name (please print): <input style="width: 100%;" type="text"/>		Contact Title: <input style="width: 100%;" type="text"/>	
Telephone Number: <input style="width: 100%;" type="text"/>		E-Mail Address: <input style="width: 100%;" type="text"/>	
Indicate the completed year(s) in the program:	<input type="checkbox"/> 2000	<input type="checkbox"/> 2001	<input type="checkbox"/> 2002
	<input type="checkbox"/> 2003	<input type="checkbox"/> 2004	<input type="checkbox"/> 2005
	<input type="checkbox"/> 2006	<input type="checkbox"/> 2007	<input type="checkbox"/> 2008
	<input type="checkbox"/> 2009	<input type="checkbox"/> 2010	<input type="checkbox"/> 2011
	<input type="checkbox"/> 2012	<input type="checkbox"/> 2013	<input type="checkbox"/> 2014

Safety Group Sponsor: Northern Ontario Safety Group

Please indicate chapter location preference

(Locations subject to change without notice; Northern Ontario Safety Group reserves the right to change chapter location preference as required.) *New Chapter locations may be possible dependent on sufficient interest and applications. Contact rosebedard@workplacesafetynorth.ca for details.

Chapter Location	<input style="width: 100%;" type="text"/>
-------------------------	---

Financial Information Disclosure:

We authorize the Workplace Safety & Insurance Board (WSIB) to disclose to the "Safety Group Sponsor" all financial information required for the administration of a Safety Group. This information would include files regarding:

Our premiums, classification, experience rating and claims frequency and severity costs.

This authorization is valid for a minimum of 12 months from the date of this application or to the following date of this application or to the following date of

(Written notice to the Standards and Incentives Branch of the WSIB is required to cancel this agreement)

*Signature <input style="width: 100%;" type="text"/>	Title (Owner/Senior Manager) <input style="width: 100%;" type="text"/>	Date (mmm/dd/yyyy): <input style="width: 100%;" type="text"/>
---	---	--

***Typed name is equivalent to signature.**

E-mail or mail completed application to:

NORTHERN ONTARIO SAFETY GROUP
c/o Workplace Safety North
690 McKeown Ave, North Bay, Ontario P1B 9P1
Toll free: 888-730-7821 ext 291

For Northern Ontario clients for WSPS, PSHSA, IHSA and WSN (Northern Ontario: Huntsville to the Manitoba border) Registration no later than December 15, 2013
Fax: 705-472-5800 E-mail: rosebedard@workplacesafetynorth.ca

NOSG 2015 Safety Group Program

WSIB Terms and Conditions of Participation

1. Employers must submit their signed application form to their sponsor by December 13, 2014.
2. Applicants to the Safety Groups Program must participate for at least one calendar year.
3. Employers applying to participate in the Safety Groups Program must be a schedule 1 employer with the WSIB and have an account in good standing without charges or convictions under the Workplace Safety & Insurance Act. An employer that experiences a traumatic fatality will be disqualified during that year from participating in the rebate.
4. Employers can participate in only one Safety Group at a time and cannot participate in the Safe Communities Incentive Program or Accreditation Program during the same year.
5. Employers participating in the Safety Groups Program are required to complete five elements annually from the Program Element List as set out in the program guidelines. Employers must successfully complete a minimum of three elements to share in any potential rebate. For an element to be considered complete, all five steps of the management system have to be in place and documented.
6. Employers must complete an annual baseline assessment of their workplace to identify their current prevention programs strengths and weaknesses. They will use this information to select their Program Elements and develop their action plan.
7. Employers are required to complete the Year-End Achievement Report by December 12, 2014.
8. Employers must appoint a Safety Groups Co-ordinator to fulfill the administrative activities required as a participant in the Safety Groups Program. Should the person appointed change during the year, the WSIB should be advised.
9. Employers must attend and participate in at least three Safety Groups meetings/workshops per year as organized by the Safety Group Sponsor.
10. Employers must participate in networking activities with other group members.
11. If asked, employers must cooperate with WSIB mid-year progress visits, and validation audits as part of the evaluation process. Employers selected for a validation audit will be required to provide documentation to demonstrate what they reported to the WSIB.
12. Employers must maintain regular contact with their Safety Group Sponsor.
13. Employers and their employees may be asked to participate in questionnaires, surveys or interviews as part of the ongoing Safety Groups Program evaluation.
14. Employers are required to adhere to the Safety Groups Program requirements as outlined in the Employer Guidelines, current edition.

Company Name: _____

* Owner/Senior Manager Name: _____

* Title: _____

* Signature: _____ Date: _____

**Typed name is equivalent to signature.*

2015 Safety Group Program

Northern Ontario Safety Groups Terms and Conditions of Participation

Upon successful program achievement for the 2014 program year, Safety Group rebate funds will be distributed to each Northern Ontario Safety Group member on a pro-rated basis relating to individual firm WSIB premiums.

Each firm will provide five percent of their annual financial rebate to support the funding of the Northern Ontario Safety Group Administrator position and related support provided by the sponsor Health and Safety Associations.

If the group is unsuccessful in achieving a rebate no funding over and above the registration fee would be required. * There is extenuation of circumstances that applications may be accepted prior to or on the first mandatory meeting of each chapter location with NOSG

Deadline to register: December 15, 2014

Applications must be received by December 15, 2014*

Fee:

Submit electronic applications to: rosebedard@workplacesafetynorth.ca

Registration fees are from: \$250 for clients with \$100,000 or less in annual WSIB premium

\$500 for clients with \$100,000 to \$500,000 in annual WSIB premiums and

\$750 for clients with 500,000 or more in annual WSIB premiums.

+ HST per WSIB account number (WSN HST # 802868299 RT0001)

Upon successful program achievement for the 2013 program year, Safety Group rebate funds will be distributed to each Northern Ontario Safety Group member on a pro-rated basis relating to individual firm WSIB premiums. Each firm will provide five percent of their annual financial rebate to support the funding of the Northern Ontario Safety Group Administrator position and related support provided by the sponsor Health and Safety Associations.

If the group is unsuccessful in achieving a rebate, no funding over and above the registration fee would be required.

* There is extenuation of circumstances that applications may be accepted prior to or on the first mandatory meeting of each chapter location with NOSG

Fees **Payment Methods:**

Cheque made payable to **Workplace Safety North** (**RE:NORTHERN ONTARIO SAFETY GROUP**)

Visa MasterCard Card #

Card Holder's Name

**typed name is equivalent to signature*

Expiry Date:

*Refundable prior to January 1, 2015; non-refundable on/after January 1, 2015 if a firm chooses to leave the program

In January 2012, Ontario's health and safety associations representing northern Ontario had expanded the Safety Groups pilot project initiated in 2011 to include 10 northern Ontario communities where individual sponsored Safety Group branches have meetings scheduled. Through this co-operative approach, the associations will strive to enhance the Safety Groups experience for clients and gain greater group success through the efforts of this multi-sector group.

The Northern Ontario Safety Group (NOSG) is organized to administer an occupational health and safety support system that will provide qualified participating firms with sector-specific program development resources and assistance to enhance the Internal Responsibility System within each firm. Our Safety Group strives to expand our reach to businesses in the identified communities along with an enhanced occupational health and safety support and networking capacity.

The HSA's are Workplace Safety North (WSN), Workplace Safety & Prevention Services (WSPS), Infrastructure Health & Safety Association (IHSA) and Public Services Health & Safety Association (PSHSA). Refundable prior to January 1, 2015; non-refundable on/after January 1, 2015 if a firm chooses to leave the program or is removed by the governing committee as a result of non-compliance with the requirements of the WSIB incentive rebate program. Fee entitles members to attended 4 (four) Northern Ontario Safety Group meetings per year.