PLEASE PRINT

☐ CEA / CISP

## July 1, 2020 - June 30, 2021

□ NOPTCA

☐ SMACNA

**PLEASE PRINT** 

☐ None (\$500)

## CONSTRUCTION SAFETY COUNCIL OF NORTHEAST OHIO RE-ENROLLMENT FORM

☐ MCI - CPI

□NECA

CONTRACTOR NAME:		
(Name as it app	ears above will be the way it appears	on any awards, etc.)
TYPE OF WORK PERFORMED:		
ADDRESS:	DRESS: CITY, STATE, ZIP:	
E-MAIL ADDRESS:		
TELEPHONE:	FAX: FE	DERAL ID #:
E-MAIL ADDRESS:		
BWC POLICY NUMBER:	AVERAGE NUMBER OF EMPLOYE	ES:
Please Circle One NA	AICS CODE (WORKING DIVISI	ONS) Please Circle One
NAICS 236 or SIC15	NAICS 237 or SIC16	NAICS238 or SIC18
Construction of Buildings	Heavy and Civil Engineering Construction	Special Trade Contractors
<ul> <li>Employers may earn cr (WCU), the Ohio Safety specific safety training</li> <li>Have a qualified senior manage</li> </ul>	t 10 meetings in the timeframe identificed the form of the time to two meetings by attending the following the fol	ed (July 1, 2020– June 30, 2021); ng Workers' Compensation University & Hygiene training courses or industry- uncil CEO event;
NAME OF CONTACT PERSON		NAME OF PRESIDENT OR CEO
EMAIL ADDRESS FOR CONTACT PERSON		EMAIL ADDRESS FOR PRESIDENT OR CEO
What would you like to see made ava	uilable in the way of training that mic	SIGNATURE OF PRESIDENT OR CEO
company?	mable in the way of training that mig	gni neip your salety enorts for your
Safety Council Use Only		
	//	
Policy Number Please mail to: Constructio	Unit Number n Safety Council, 950 Keynote Circl	Safety Council Code Group Code e #10, Brooklyn Hts., OH 44131