CONSTRUCTION SAFETY COUNCIL OF NORTHE Co-sponsored by BWC's Division of Safety and SEMI-ANNUAL REPORT	
Due by January 15, 2019 (for current period July 1, 2018 - December 31, 2018 Safety Council Account Number	
Company Name:	Phone:
Address:	Fax:
City / State / Zip	
<ul> <li>0 Please check here if information provided above has been upd</li> <li>1.) Date of most recent injury or illness resulting in day(s) and the most recent accident in company history resulting in day</li> </ul>	away from work.
Month Day Year	
port All Information Below For CURRENT SIX MONTH PERIOD ONLY (this BOTTOM section is only for data from July 1, 2018 - Dec Note: If you report a death or days away from work case in the current s 5), the most recent date of death or days away from work case must	ix month period (item 4 or
<ul> <li>Record work related injury and illness data for the last six months (July</li> <li>2. Average Number of Employees</li> <li>3. Total hours worked</li> <li>4. Number of fatality cases</li> <li>5. Number of Days Away from work cases</li> <li>6. Number of Restricted or Transferred Cases</li> <li>7. Number of Other Recordable cases</li> <li>8. Number of Days Away from work</li> </ul>	1 - December 31, 2018)  
Please return this form to: CONSTRUCTION SAFETY COUNCIL OF NORTHEAST 950 KEYNOTE CIRCLE, SUITE 10 BROOKLYN HEIGHTS, OHIO 44131 PHONE (216) 398-9860 FAX (216) 398-9	