

SUBCONTRACT SAFETY PERFORMANCE REPORT

Subcontractor shall submit this form to the Subcontract Technical Representative (STR) before the third day of each month. STR must ensure report is complete.

	REPORTING MONTH
REPORTING SUBCONTRACTOR	SUBCONTRACT NUMBER
CNS Y-12 SUBCONTRACT STR	STR PHONE NUMBER

TOTAL HOURS WORKED THIS MONTH	
FIRST AID CASES	
RECORDABLE CASES	
LOST WORKDAY CASES	

REPORT SUBMITTED BY	PHONE NUMBER	DATE OF REPORT
COMMENTS		

FOR STR USE	
SUBCONTRACT TYPE <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> SERVICES	STR: Submit completed report to: SubcontractSafety@onetnet.cns.doe.gov