

APPLICANT INFORMATION

Agency Name: _____ Agency Code: _____

Effective Date: _____

Applicant: _____

Mailing Address: _____

Website Address: _____

Processes:

1. Which of the following best describes daily operations and processes? Check all that apply.

- | | | | | | |
|--|---|--|--|---|--|
| <input type="checkbox"/> Assembly | <input type="checkbox"/> Dip Tanks | <input type="checkbox"/> Finishing | <input type="checkbox"/> Forging | <input type="checkbox"/> Grinding | <input type="checkbox"/> Heat Treating |
| <input type="checkbox"/> Hot Extrusion | <input type="checkbox"/> Laser Cutting | <input type="checkbox"/> Machining | <input type="checkbox"/> Other Extrusion | <input type="checkbox"/> Plasma Cutting | <input type="checkbox"/> Plating |
| <input type="checkbox"/> Rolling—Hot | <input type="checkbox"/> Rolling—Other | <input type="checkbox"/> Sintering | <input type="checkbox"/> Stamping | <input type="checkbox"/> Turning | <input type="checkbox"/> Water-jet Cutting |
| <input type="checkbox"/> Electric Discharge Machining | <input type="checkbox"/> Hot Work (Cutting Welding) | <input type="checkbox"/> Sheet Metal Forming | | | |
| <input type="checkbox"/> Casting, Foundry or other operations involving molten metal | | | | | |

2. Check all that apply to the following processes, if you perform them.

- a. ☐ Hot Work (Cutting, Welding)
 - ☐ Routine manufacturing operation ☐ Maintenance and Repairs only ☐ Permit required
 - ☐ Manual process in designated work stations ☐ Automated process on CNC machines
- b. ☐ Finishing (Spray Painting, Powder Coating, Dip Tanks, Heat Treating)
 - ☐ Solvent-based finishes _____% ☐ Powder-based Finishes _____%
 - ☐ Open area spray finishing
 - Number of spray booths _____ Number of powder coating booths _____
 - All spray and powder coating booths are UL-approved? ☐ Yes ☐ No
 - Number of continuous spray painting or powder coating lines _____
 - ☐ Explosion-proof electrical
 - Number of dip tanks _____ UL-approved? ☐ Yes ☐ No
 - Describe use of dip tanks _____
 - Number of ovens _____ UL-approved? ☐ Yes ☐ No
 - Describe heat-treating operations _____
- c. ☐ Plating or Engraving
 - ☐ Performed in a designated area or room ☐ Plastic plating tanks ☐ Metal plating tanks
 - ☐ Electric immersion heaters ☐ Direct gas fired tube heaters ☐ Indirect heating
 - ☐ Tanks are equipped with temperature controls
- d. ☐ Hot Rolling, Extrusion and Forging: Hot rolling, Hot extrusion, Hot, warm and Cold forging
 - ☐ Protected by water-based sprinklers ☐ Done in a cutoff room
- e. Hot Work, Finishing, Plating and Rolling/Extrusion/Forging Operations occupy less than 30% of factory floor ☐ Yes ☐ No
- f. ☐ Other Processes: Please describe operation _____



3. Materials

a. ☐ Flammable/Combustible Liquids

Gallons stored _____ ☐ No special storage requirements apply

☐ UL listed flammable liquid storage cabinets ☐ Flammable liquid storage room Sq. ft. _____

Other (please describe) _____

b. ☐ Combustible Dusts

Do your operations include the processing of any of the following metals? Check all that apply

☐ None ☐ Titanium ☐ Beryllium ☐ Magnesium

☐ Cadmium ☐ Tungsten ☐ Lithium ☐ Zirconium

Please describe operation: _____

How is combustible dust controlled?

☐ Dust collection system ☐ System vents outside building with spark arrestors in ducts

☐ Housekeeping ☐ Employee training

4. Private Protection:

Location Number: _____ Hours in operation per day _____ Days in operation per week _____

Which of the following describes private protection features of the location.

☐ Automatic Sprinkler System ☐ Wet ☐ Dry Percentage of facility sprinklered _____%

If coverage is less than 100% describe non-covered areas _____

Alarms

☐ Local ☐ Central Station (constantly monitored) ☐ Water Flow ☐ Valve Tamper

☐ Fire Alarms

☐ Local ☐ Central Station (constantly monitored) ☐ Smoke Detection ☐ Heat Detection

Percentage of facility covered by alarms _____%

If coverage is less than 100% describe non-covered areas _____

☐ Security Alarms

☐ Local ☐ Central Station ☐ Exterior Access Points ☐ Motion Detection ☐ Key Card Access ☐ CCTV

☐ Other, please describe _____

Facility and Equipment:

1. Building Updates—year of most recent updates.

Roof _____ Electrical _____ Plumbing _____ HVAC _____

2. Check all that apply to your process machinery

☐ Mostly robotic, CAM or CNC controlled ☐ Mostly manual

☐ All machines are less than 25 years old ☐ Some machines are greater than 35 years old

3. Which of the following best describe facility and maintenance procedures

☐ Routine facility and equipment inspections ☐ Manual preventative maintenance tracking program

☐ Computerized preventative maintenance tracking program

Staff:

1. Turnover _____%

2. Machinery operators have technical certifications or OEM training?

☐ Yes ☐ No

3. Welders are American Welding Society (AWS) certified?

☐ Yes ☐ No

Design Procedures:

1. Which of the following describe your product design operations and procedures?

☐ Work to customer specifications ☐ Products designed by degreed engineers

☐ CAD software is used ☐ Products evaluated and prototypes tested for durability and safety

☐ Products designed to recognized standards (OSHA, ANSI, ASTM, etc)

☐ Hazard analysis includes foreseeable uses and misuses



Quality Control:

1. Percent of products: Parts and components ____% Finished products ____%
2. List all ISO or similar product quality certifications _____
3. How do you validate the quality of your products? (Check all that apply)
☐ SPC ☐ Written QC program ☐ In process measurement and testing ☐ End process testing
☐ Testing on statistically credible sample ☐ Third party or customer testing
4. Percent of sales from products made in Canada, W. Europe, Japan or S. Korea ____%
5. Percent of sales from non-domestic products made elsewhere ____%
6. Describe products imported from sources described in 5 above:

7. How do you validate the quality of products and services supplied to you? (Check all that apply)
☐ Inspection ☐ Testing ☐ You receive COAs or Mill certs ☐ You have a Master Contract with major suppliers
☐ Your master contract requires suppliers to:
☐ Indemnify you for losses caused by their products ☐ Make you an Additional Insured on their policy
☐ You use purchase orders with your contract printed on the back ☐ You accept contracts from suppliers

Traceability/Record keeping:

1. How can your products be identified post sale? (check all that apply)
☐ All products have unique ID or batch numbers ☐ Markings can't be effaced or removed from durable products
☐ All parts and services can be traced back to suppliers ☐ All finished products can be traced to customers
2. How long do you keep design, sourcing, production and testing records? _____

Warning Labels and Instructions:

Please answer if you make finished products that go directly to distributors or retailers. Otherwise, skip this section.
(check all that apply)

1. Warning labels are:
☐ Clearly displayed ☐ Hard to remove ☐ Comply with ANSI standards
☐ Instructional materials are reviewed by qualified legal experts

Off-Premises Operations:

1. What percent of your revenue comes from installation, repair or service operations? ____%
2. Do you perform installation, repair or service on products of others? ☐ Yes ☐ No

Worker Sourcing:

1. Do you have workers in your facility who are not employed by you, working through a temp agency, employee leasing firm or PEO? ☐ Yes ☐ No
2. If Yes, do you have contracts with the employer that hold you harmless? ☐ Yes ☐ No