



Written Injury & Illness Compliance Manual Order Form

Company Name

Name as written on current Comp policy

DBA - If necessary: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Contact Name: _____

Contact Phone: _____

Responsible Safety Officer

If none, who handles your safety talks/meetings?

How many employees are on safety committee:

List title of supervisor conducting safety meetings:

Additional Locations

Does your company have multiple locations? In addition to the main location listed above, please list all other locations. A separate manual will be created for each location listed.

Additional Location 1: _____

Additional Location 2: _____

Additional Location 3: _____

Industry Type - for logo purposes: _____

Final Manual Layout Requirement

Entire manual Cover page Contents page

How Did You Hear About USComp.org? _____



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Pricing

Written Manual for 1st Location- **\$599**

Each Additional Location - **\$99**

Non-Hazard Injury Illness Program - **\$199**

Make your current outdated manual compliant - **\$99**

Total # Manuals: _____

Total Cost: _____

Payment Type: Check Visa MasterCard
 Discover American Express

What you will receive and more!

- Professionally Designed Binder with included written Injury & Illness Compliance Manual - includes design, labor, printing, binder and first class postage.
- General Code of Safe Work Practices
- A written Program specific to the Compliance Requirements of your state
- OSHA Logs 300, 300A and 301 Forms
- 12 months of Safety Meetings
- Certificate of Compliance
- Exit & Escape Route Plan
- You will also receive 1 month free membership to My-EClaims on www.allthingsinsurance.net which will allow you to track and maintain your Workers Comp claims!

Payment must be received in order to process your order. Once we receive your order, a representative of USComp.org will contact you shortly regarding payment.

Please send payments to:

USComp.org
P.O. Box 247
Summit, MS 39666

Fax: (415) 520-0357

Orders accepted daily - please allow three weeks for shipping following guarantee of payment.

Thank you for using USComp.org for your compliance needs!

P.O. Box 247 Summit, MS 39666 Fax: (415) 520-0357
Visit us online at www.uscomp.org
Questions? Email us at questions@uscomp.org