

LOVELAND & SMART INSURANCE SERVICES, INC

EMPLOYER PROFILE QUESTIONNAIRE

LOSS PREVENTION

Name of Applicant: _____

1. Do you have a dedicated staff (including safety committees) to handle safety initiatives, and if so, what are their responsibilities?

2. Describe your safety program, including employee involvement and management commitment.

3. Explain your accident reporting and investigative procedures.

4. Describe your employee safety-training program.

5. Over the last five years, what major loss prevention initiatives have you instituted that you feel have had a significant effect on reducing loss exposure or safety culture. (Please indicate when these initiatives were incorporated into your existing processes.)

6. Do you have any incentive programs for management and employees incorporating safety and program results?