



## 2022 FLEET SAFETY AWARDS COMPETITION ENTRY

Company Name:			Company US DOT Number:			Date:	
Mailing Address:			City:		State:	Zip Code:	
Name of Individual Co	mpleting	g Form:		Title:			
Email:				Phone:			
Foundation (ATAF) wish mileage and safety record	to select l, conside fforts, to	member fleets ration will be genhance highwa	which exemplify the half iven for work-place says afety and the imag	ighest standards of s fety, community out	afety. In add reach, emplo	rizona Trucking Association lition to a company's on-roa oyee recognition programs Please complete the addition	d
FLEET CATEGORIES 1500,0011,000,0013,000,0017,000,001	to to to to	(Please check 500,000 AZ n 1,000,000 3,000,000 7,000,000 and over	<b>x one category)</b> niles per year	have an accident frequencies Arizona DOT recorda  To establish the AFR, 1,000,000 miles. Divide for the calendar year.	ency rate (AF ble accidents a multiply the n e that number	y Awards Program it must R) no higher than 6.5 for and Arizona miles only.  umber of AZ accidents by by the total AZ miles driven  500,000 AZ miles = an AFR of 6	
TOTAL AZ DOT ACC	IDENTS	ТОТ	CAL AZ MILEAGE	FF	REQUENCY	Y RATE	
motor vehicle operating of (i) A fatali (ii) Bodily from the scene of (iii) One or	on a highwaity, injury to of the acci more mo	way in interstate a person who, a dent; or tor vehicles inc	e or intrastate commercase a result of the injury urring disabling dama	ce which results in: , immediately receiv ge as a result of the a	es medical t	•	
vehicle(s) to be a  A COMPANY OFFICE SIGN THIS APPLICAT I hereby certify that the a	R/DIRE	CTOR/MANA		N THE PERSON SU		G THIS FORM MUST	
Signature:			Title:				

DEADLINE: PLEASE SUBMIT THIS FORM TO ATA NO LATER THAN JUNE 30, 2023. LATE ENTRIES WILL NOT BE ACCEPTED

YOU MAY EMAIL OR FAX THIS FORM TO: Jolgine@aztrucking.com or Fax (602) 252-8008

Information sheet citing specific criteria which will be used to determine winners in each fleet category.  Please use another page if more space is needed.				
1)	Work-Place Safety – Examples of safety programs implemented, initiatives, training or incentive programs.			
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2)	Employee Recognition – Cite any employee "recognition of performance" programs in place.			
3)	Community Outreach with ATA – Do you participate in "Share the Road", "Teens & Trucks", "Road Check in Flagstaff", Glendale Touch-a-Truck or Be Safe Saturday? If yes, please identify which programs and why.			
4)	Other demonstrated efforts to enhance highway safety and the image of the transportation industry.			
5)	Any Additional Information to be considered.			
	Please attach all supporting documents when submitting your form.			

Winners will be announced at the ATA Carrier Conference on October 2, 2023.