

**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By April 14, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category I</b>				
<b>Safety Committee Meeting/Accident Review Panel (4 points per quarter)</b>				
Meeting Date	Minutes Attached		Accidents Reviewed	
	Yes	No	Yes	No

<b>Category II</b>	
<b>Attendance at Quarterly JIF Safety Meeting (2 points per quarter)</b>	
Date: _____	
# attended: _____	

<b>Category III</b>		
<b>Self-Inspections Performed (3 points per quarter)</b>		
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____

<b>Category IV</b>		
<b>Hazard Assessment (3 points per quarter)</b>		
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____

<b>Category V</b>		
<b>Job-Site Observations (1 point each/3 points per quarter max)</b>		
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____

Fax to: (609) 275 - 9662

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2023 Safety Incentive Program  
Quarterly Report Form**

Due By April 14, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category VI JIF/MEL Seminar Attendance (5 points per quarter)</b>	
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Seminar:	Date:
Seminar:	Date:
Seminar:	Date:
Seminar:	Date:

<b>Category VII Safety Videos (4 points per quarter)</b>	
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Title:	Date:
Title:	Date:
Title:	Date:
Title:	Date:

<b>Category VIII MVR Checks (4 points per year)</b>	
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Date:	#
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<b>Extra Credit Any of the above categories (1 point each)</b>	
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Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By July 14, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category I</b>				
<b>Safety Committee Meeting/Accident Review Panel (4 points per quarter)</b>				
Meeting Date	Minutes Attached		Accidents Reviewed	
	Yes	No	Yes	No

<b>Category II</b>	
<b>Attendance at Quarterly JIF Safety Meeting (2 points per quarter)</b>	
Date:	
# attended:	

<b>Category III</b>		
<b>Self-Inspections Performed (3 points per quarter)</b>		
Department:	Date:	Location Surveyed:
Department:	Date:	Location Surveyed:
Department:	Date:	Location Surveyed:
Department:	Date:	Location Surveyed:

<b>Category IV</b>		
<b>Hazard Assessment (3 points per quarter)</b>		
Department:	Date:	Description of hazard reviewed:
Department:	Date:	Description of hazard reviewed:
Department:	Date:	Description of hazard reviewed:

<b>Category V</b>		
<b>Job-Site Observations (1 point each/3 points per quarter max)</b>		
Department	Date:	Task observed:
Department	Date:	Task observed:
Department	Date:	Task observed:

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By July 14, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category VI</b>	
<b>JIF/MEL Seminar Attendance (5 points per quarter)</b>	

Seminar:	Date:
Seminar:	Date:
Seminar:	Date:
Seminar:	Date:

<b>Category VII</b>	
<b>Safety Videos (4 points per quarter)</b>	

Title:	Date:
Title:	Date:
Title:	Date:
Title:	Date:

<b>Category VIII</b>	
<b>MVR Checks (4 points per year)</b>	

Date:	#
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<b>Extra Credit</b>	
<b>Any of the above categories (1 point each)</b>	

Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By October 13, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category I</b>				
<b>Safety Committee Meeting/Accident Review Panel (4 points per quarter)</b>				
Meeting Date	Minutes Attached		Accidents Reviewed	
	Yes	No	Yes	No

<b>Category II</b>	
<b>Attendance at Quarterly JIF Safety Meeting (2 points per quarter)</b>	
Date: _____	
# attended: _____	

<b>Category III</b>		
<b>Self-Inspections Performed (3 points per quarter)</b>		
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____

<b>Category IV</b>		
<b>Hazard Assessment (3 points per quarter)</b>		
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____

<b>Category V</b>		
<b>Job-Site Observations (1 point each/3 points per quarter max)</b>		
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By October 13, 2023

MUNICIPALITY: \_\_\_\_\_

<b>Category VI</b>	
<b>JIF/MEL Seminar Attendance (5 points per quarter)</b>	

Seminar:	Date:
Seminar:	Date:
Seminar:	Date:
Seminar:	Date:

<b>Category VII</b>	
<b>Safety Videos (4 points per quarter)</b>	

Title:	Date:
Title:	Date:
Title:	Date:
Title:	Date:

<b>Category VIII</b>	
<b>MVR Checks (4 points per year)</b>	

Date:	#
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<b>Extra Credit</b>	
<b>Any of the above categories (1 point each)</b>	

Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By January 17, 2024

MUNICIPALITY: \_\_\_\_\_

<b>Category I</b>				
<b>Safety Committee Meeting/Accident Review Panel (4 points per quarter)</b>				
Meeting Date	Minutes Attached		Accidents Reviewed	
	Yes	No	Yes	No

<b>Category II</b>	
<b>Attendance at Quarterly JIF Safety Meeting (2 points per quarter)</b>	
Date: _____	
# attended: _____	

<b>Category III</b>		
<b>Self-Inspections Performed (3 points per quarter)</b>		
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____
Department: _____	Date: _____	Location Surveyed: _____

<b>Category IV</b>		
<b>Hazard Assessment (3 points per quarter)</b>		
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____
Department: _____	Date: _____	Description of hazard reviewed: _____

<b>Category V</b>		
<b>Job-Site Observations (1 point each/3 points per quarter max)</b>		
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____
Department _____	Date: _____	Task observed: _____

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**Mid Jersey Municipal Joint Insurance Fund  
2023 Safety Incentive Program  
Quarterly Report Form**

Due By January 17, 2024

MUNICIPALITY: \_\_\_\_\_

<b>Category VI</b>	
<b>JIF/MEL Seminar Attendance (5 points per quarter)</b>	

Seminar:	Date:
Seminar:	Date:
Seminar:	Date:
Seminar:	Date:

<b>Category VII</b>	
<b>Safety Videos (4 points per quarter)</b>	

Title:	Date:
Title:	Date:
Title:	Date:
Title:	Date:

<b>Category VIII</b>	
<b>MVR Checks (4 points per year)</b>	

Date:	#
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<b>Extra Credit</b>	
<b>Any of the above categories (1 point each)</b>	

Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:
Category:	Description:

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