



## WORKPLACE SAFETY PROGRAM APPLICATION CHECKLIST

- I am submitting this application to the WPS program 5-7 months prior to the renewal date.
- For seasonal businesses, I included accurate operation dates and hours of operation.
- I have listed all current Delaware addresses for locations covered under my workers compensation insurance policy, even if I have applied before and listed addresses on previous applications.
- I have included all workplace injury data for the previous 36 months.
- I confirmed the number of full-time and part-time employees on the workplace injury data page.
- If offsite work is conducted, I completed the jobsite addendum.
- If applicable, I have reviewed my previous inspection report and addressed all recommendations.
- My inspection fee check is made payable to the Delaware Insurance Department. Fees are not applicable for inspections conducted by workers compensation insurance companies however, the WPS application process remains the same.
- I am prepared for an unannounced inspection, and I understand that refusing the inspection will result in the denial of the program discount.