

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Year _____



U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OSHA no. 1216-176

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are

Using the Log, count the individual entries you made for each category. Then write the totals below making sure you've added the entries from every page of the Log. If you had no cases write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types

Total number of...	(M)	(N)	(O)	(P)
(1) Injury	1	(H) Poisoning	0	
(2) Skin Disorder	0	(I) Hearing Loss	0	
(3) Respiratory Condition	0	(J) All Other Illnesses	0	

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time to review the instruction, search existing data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspect of this data collection, contact: U.S. Department of Labor, OSHA Office of Statistics, Room 3601, 200 Constitution Ave. NW, Washington, DC 20210. Do not send comments to the following address.

Establishment information

Your establishment name Chadwick's Restaurant
712 E Lake Street SE
 City North Las Vegas State NV Zip 89008
 Industry description (e.g., Manufacture of motor trucks (3361))
Others
 Standard Industrial Classification (SIC), if known (e.g., SIC 3710)

 North American Industrial Classification (NAICS), if known (e.g., NAICS 336210)

Employment information

Annual average number of employees 35
 Total hours worked by all employees last year 35,268.00

Sign here Michelle Chadderton

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Michelle Chadderton Title Owner
 Company address 712 E Lake Street SE
 City North Las Vegas State NV Zip 89008