

H2A Supplemental

Employer: _____ Website: _____

Years of operation: _____ State(s) of operation: _____

General Information

1) H2A contract dates:

From: _____ To: _____

From: _____ To: _____

From: _____ To: _____

From: _____ To: _____

2) H2A employees will be employees of the applying risk and not subcontracted through another employer I confirm

3) Number of H2A employees requested: _____

4) Any interchange of labor? Yes No

5) Number of hours worked per week: _____ Rate of pay: _____

Building Information

1) Who owns the housing the employees will be staying in? _____

2) Address, square footage, and number of employees for each housing location:

Address	Square footage	# employees per building
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Attach additional on a separate page*

3) Select the applicable housing items:

Kitchen

Indoor plumbing

Smoke alarms If yes, how many in each location: _____

Fire extinguishers If yes, how many in each location: _____

4) Address of each work site location

**Attach additional on a separate page*

Transportation Exposure

- 1) Number of each type(s) of vehicles used to transport employees from housing to farm:
- Van: _____ # of passengers: _____ Seatbelts
- Bus: _____ # of passengers: _____ Seatbelts
- Truck: _____ # of passengers: _____ Seatbelts

- 2) Are maintenance records available for each vehicle? Yes No
- 3) Who owns the vehicles that are used to transport the employees? _____

4) Enter name and license information for each driver:

Name	Type of License/Class
_____	_____
_____	_____
_____	_____
_____	_____

**Attach additional on a separate page*

- 5) Are clean MVRs available for each driver? Yes No
- 6) Is there a cell phone policy for drivers? Yes No
- a) If yes, is it enforced? Yes No
- 7) Are they driving on highways? Yes No
- a) If yes, how many miles (one-way)? _____ miles
- 8) Is a seat belt policy enforced? Yes No
- 9) Maximum distance (one-way) from housing to workplace: _____ miles

Miscellaneous

- 1) How often do employees go to any location other than the workplace? (i.e., grocery store, laundromat, etc.): _____
- 2) How far do employees travel (one-way) to get to the above locations? _____ miles
- 3) How do employees prepare meals?
- Stove Hot plate Microwave
- Other: _____
- 4) Do employees go to restaurants regularly? Yes No
- 5) Additional comments:

Employer Signature: _____ Date: _____