

FACILITY EQUIPMENT & SAFETY

GRANT PROGRAM SUBMITTAL FORM

IRMA Loss Control Visits provide Members with facility and safety recommendations. This grant will assist members with the costs of implementing corrective actions increasing the safety of facilities and reducing hazards for all staff. Reimbursements will be issued on a first/come, first/served basis, based on completed grant requirements, for each year until the budgeted amount is depleted. For more information regarding the General Grant Guidelines, please visit the IRMA website or click [here](#).

Program Guidelines

1. Members planning to request partial reimbursement for the purchase of equipment, conducting testing and/or implementing protective measures within facilities must complete and **submit this application**.
2. Member departments can submit more than one application during a budget year, but the second application will be given lower priority. Priority will be given to any department that has not previously received the equipment grant, which will be considered Tier I. All departments that have previously received grant funding will be considered Tier II applicants and will only receive additional grant funding if funds are available after Tier I grants are paid.
3. Eligible equipment, testing and abatement measures includes, but is not limited to: equipment (Fall Protection, Signs, Storage Containers, etc.), testing (ARC Flash, Silica, Lead, Noise Level Surveys, etc.), and abatement measures (HVAC, Cleaning Equipment, etc.).
4. Upon verification that the equipment was purchased, IRMA will reimburse the member total fee paid for the equipment, up to a maximum of \$2,500.
5. Each member applicant must produce an itemized invoice(s), proof of payment (check copies), and finalized reports (testing/abatement only).

Should you have any questions about the application, please contact Jennifer Swahlstedt at the IRMA office (708.236.6365) or jennifers@irmarisk.org for assistance.

In the bottom right corner, there is a decorative graphic consisting of several overlapping, semi-transparent purple circles of various sizes, similar to the ones in the top left.



Please complete the Facility Equipment & Safety Grant Application below and send to grants@irmarisk.org.

MEMBER NAME:

CONTACT NAME:

PHONE NUMBER:

CORRECTIVE ACTION MEASURE:

EMAIL ADDRESS:

IDENTIFIED FROM:

IRMA LOSS CONTROL VISIT

FACILITY INSPECTION

OUTSIDE AGENCY (IDOL, EPA, ETC.)

OTHER:

EQUIPMENT PURCHASES:

NAME & MODEL OF EQUIPMENT TO PURCHASE:

TESTING CONDUCTED:

TYPE OF TESTING:

NAME & CONTACT OF PROVIDER:

ABATEMENT MEASURES:

TYPE OF ABATEMENT:

NAME & CONTACT OF PROVIDER:

ESTMIATED PRICE:

\$

EXPECTED COMPLETION DATE

Month:

Year: