



Summary of Work-Related Injuries and Illnesses

Year 2024

Department of Industrial Rel.
Division of Occupational Safety &

Desc: POLICE DEPARTMENT

Disinfectants covered by CCR Title 8 Section 14300 must complete this Annual Summary, even if no work-related injuries or illnesses occurred the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

On 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 cases, write "0".

Employees, former employees, and their representatives have the right to review the Cal/OSHA Form 300 in its entirety. They also have limited access to the Cal/OSHA 301 or its equivalent. See CCR Title 8 Section 14300.35. In Cal/OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Number of cases	Total number of cases with days away from work	Total number of cases with job transfer or restrictions	Total number of other recordable cases
0	5	1	7
(H)	(I)	(J)	

Number of Days

Number of days away from work	Total number of days of job transfer or restriction
77	
(K)	(L)

Injury and Illness Types

Number of ...	(M)	(4) Poisonings	(5) Hearing loss	(6) All other illnesses
13				
0				
0				
0				

This Summary page from February 1 to April 30 of the year following the year covered by the form.

Establishment information

Your establishment name City of South San Francisco - Police Department

Street 1 Chestnut Ave

City South San Francisco State CA ZIP 94080

Industry description (e.g., Manufacturing of motor truck trailers)

Local Municipal

Standard Industrial Classification (SIC), if known (e.g., 3715)

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information (if you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees 132

Total hours worked by all employees last year 205,616

Sign here

Knowingly falsifying this document may result in a fine.

Signature: [Signature] Title: Chief of Police
Phone: (505) 871-8930 Date: 1/27/2025