Year 2023

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

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even in no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

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 Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Case	es		
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
(G)	(H)	(I)	(J)
Number of Days			
Number of Days	•		
Total number of days away from work		Total number of day transfer or restriction	
1240		391	
(K)	•	(L)	
Injury and Illnes	s Types		
Total number of (M)			
(1) Injuries	47	(4) Poisonings	0
(2) Skin disorders	0	(5) Hearing loss of	cases 5
(3) Respiratory cor	nditions 0	(6) All other illnes	sses

Establishment	King County Safety and Claims							
Location	0600-NATURAL RESOURCES & PARKS							
Address	Excluding WTD							
City	State							
Industry description (e.g. Manufacture of motor truck trailers): Local Government								
Standard Industri 9199	al Classification (SIC), if known (e.g. SIC 3715)							
Employment	information							

Establishment Information

Annual average number of employees: 16,602

Total hours worked by all employees last year: 28,992,648

Sign here

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.

Mary Bert Short

Company Executive: Mary Beth Short Title: Division Manager

Phone: 206-263-2506 Date: 1/20/2024

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 50 minutes per response, including time to review the instructions, search and gather the 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 other aspect of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave., NW, Washington DC 20210. Do not send the completed forms to this office.

Printed: 1/28/2024

OSHA's Form 300A Year 2023

Summary of Work-Related Injuries and Illnesses

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Grand Totals				
Number of Cases Injury and Illness Type	es (1) Injuries	1068	(4) Poisonings	0
(G)	(2) Skin disorders	0	(5) Hearing loss cases	34
Number of Days	(3) Respiratory conditions	13	(6) All other illnesses	21
(K) 40284 (L) 10762				

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