**Company Contact Information**

**These are contacts for the Olin Freeport Site**

Please complete the following information

|  |  |
| --- | --- |
| Company Name |  |

Add more lines if necessary

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name | Business Phone | Cell Phone | Email | Role |
| Main Company Contact |  |  |  |  |  |
| Who forwards information to the rest of your organization information? |  |  |  |  |  |
| Work hours contact |  |  |  |  |  |
| Safety Contact |  |  |  |  |  |
| On Site Support |  |  |  |  |  |
| Badging Contact (who will be submitting badging requests) |  |  |  |  |  |

Return to Olin Contractor Safety – ffrbehs@olin.com

2/10/2022