

REPORTING DAMAGED PROPERTY OR INJURY POLICY

OBJECTIVE

At EverGRO Cooperative we recognize that circumstances may arise where damage may occur to property or vehicles of the Cooperative's or a customer. In addition, this policy also pertains to reporting if an employee is injured at work, has a near miss or a first-aid circumstance. This policy will provide step-by-step expectations for reporting an incident, decision-rights on how to resolve these incidents, and repercussions for failing to follow the procedure and expectations set in this policy.

POLICY

This policy is intended to set expectations for our managers within every division of the Cooperative when it comes to addressing damage that is done to company OR customer OR vendor property, including, but not limited too, items such as vehicles, equipment, buildings, fences, posts, tools, etc. The policy will outline expectations for managers to report these circumstances, what happens for not reporting, and how to properly resolve the damaged items.

Expectations

In the case of any damage to company property or customer property including but not limited to, vehicles, equipment, buildings, fences, posts, etc., it must be reported immediately to a member of management. A picture should be taken of the damage as soon as possible, alongside documenting details of how the situation occurred, and included with the 'Damaged Incident or Injury Reporting Form' that can be found in 'Appendix A' of this policy.

Employees should report any damage to their manager as soon as possible. If any employee does not report an incident in a timely manner to their manager OR if a manager does not report damage by following the steps outlined below, disciplinary action may be taken, up to and including, termination of employment.

Supervisors are required to report any damage, by following the steps below:

1. Complete, with as much detail as possible, the 'Damaged Incident or Injury Reporting Form'.
2. Send the form to, incidents@evergrofs.com.
3. Do not submit the damage as a claim or a Workers Compensation case to Southern States Insurance Exchange until discussions with the Division Director and General Manager have been completed.
4. If the damage was done to a customer/vendor property, do not commit or take any action to correct the circumstance until filing the reporting form and having a discussion with the Division Director and General Manager.
5. If the damage was done to company property that may cause the vehicle/equipment/tool to be rendered unsafe to operate, immediately take it out of commission by either removing keys/accessibility to operate OR place signage/tag stating the it is 'inoperable'.

Disciplinary Actions

Employees should report any damage or injury to their manager as soon as possible. If any employee does not report an incident in a timely manner to their manager OR if a manager does not report damage by following the steps outlined below, disciplinary action may be taken, up to and including, termination of employment.

Stages of Disciplinary Action:

1. **Verbal Discussion:** If an incident is not immediately reported by an employee or manager, a verbal discussion must be made with the employee and documented in their Paylocity profile, under Journals - "Notes (EverGRO)," documenting the details of the circumstance and what was discussed.
2. **Written Disciplinary Action:** A Written Warning will be issued to an employee/manager if an incident is not reported on more than one occasion, following having a verbal discussion has been previously conducted, as outlined in this policy. The Written Warning should be documented in the employee's Paylocity profile, under Journals - "Written Warning (EverGRO)." A written warning may also be issued without a verbal discussion having previously been conducted if the severity of the initial action warrants an elevated degree of disciplinary action.
3. **Final Disciplinary Action:** A Final Written Warning will be issued to an employee/manager who fails to report the damaged circumstances on multiple occasions through the steps outlined in this policy OR the initial actions by the employee are severe and warrant an elevated degree of disciplinary action. The Final Written Warning should be documented in the employee's Paylocity profile under Journals - "Final Written Warning (EverGRO)."

ACKNOWLEDGEMENT

I have read and understand this policy and the expectations outlined regarding steps to report damaged property and what may happen for failure to follow the outlined expectations. I understand that as a manager it is my responsibility to encourage my employees to report any damage of property immediately. In addition, as a manager, it is my responsibility to ensure damaged property is repaired properly by following the steps outlined above.

By signing this acknowledgement, I agree to follow this policy and understand my responsibilities to uphold it as a manager of EverGRO Cooperative.

Employee Name (Printed)

Employee Signature

Date

APPENDIX A

EverGRO Cooperative Damage Incident or Injury Report Form

****Supervisor & employee are to complete this form in as much detail as possible and then send to, incidents@evergrofs.com.****

REPORTED BY: _____ DATE/TIME OF REPORT: _____
TITLE / ROLE: _____ DIVISION DIRECTOR: _____

INCIDENT INFORMATION

INCIDENT TYPE (Property/Vehicle/Equipment Accident/Injury): _____ DATE/TIME OF INCIDENT: _____

LOCATION: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SPECIFIC AREA OF LOCATION (i.e. warehouse, showroom, office, loading area/docking area, etc.): _____

Was the damage done to EverGRO Company
Property: YES NO

Was the damage done to Customer or Vendor
Property: YES NO

DESCRIPTION OF DAMAGES: (Please include pictures of any property damage, details of what occurred and how it occurred, environmental factors, situation surrounding the damage, etc.)

{IF APPLICABLE: EMPLOYEE(S) INVOLVED STATEMENT}

CONTACT OF PARTIES INVOLVED

1. Name: _____ Job Title/Role: _____ Phone #: _____
2. Name: _____ Job Title/Role: _____ Phone #: _____
3. Name: _____ Job Title/Role: _____ Phone #: _____

CONTACT OF WITNESSES

1. Name: _____ Job Title/Role: _____ Phone #: _____
2. Name: _____ Job Title/Role: _____ Phone #: _____
3. Name: _____ Job Title/Role: _____ Phone #: _____

POLICE REPORT FILED? _____ PRECINCT: _____

REPORTING OFFICER: _____ PHONE: _____

By signing below, I acknowledge I have completed this form to the best of my ability, including as much detail and documentation to outline the damage reported. I also acknowledge that this form will be immediately sent to: incidents@evergrofs.com and that I will not take any further action to repair damages or address the situation until I communicate and receive guidance from my Division Director and General Manager.

SUPERVISOR NAME: _____ SUPERVISOR SIGNATURE: _____ DATE: _____

This Section To Be Completed After Emailing Report to: incidents@evergrofs.com

**REPORTED TO
INSURANCE COMPANY
(YES/NO):** _____

**DATE
REPORTED:** _____

CLAIM NUMBER: _____

**MEMBER OF
LEADERSHIP NOTIFIED :** _____

**DATE/TIME
NOTIFIED:** _____

**Estimated Costs of
Damage:** _____

**Will Damage
Be Covered by
EverGRO:** _____

YES NO

**Name of Company
Repairing Damages :** _____

**Company
Contact
Information:** _____

FOLLOW-UP ACTION ITEMS

**SUPERVISOR
NAME:** _____

**SUPERVISOR
SIGNATURE:** _____

DATE: _____

**DIVISION
DIRECTOR
NAME:** _____

**DIVISION
DIRECTOR
SIGNATURE:** _____

DATE: _____

**GENERAL
MANAGER
NAME:** _____

**GENERAL
MANAGER
SIGNATURE:** _____

DATE: _____

EverGRO's Reporting Damaged Property Flow Chart

Damage Occurs to Company Property/Customer Property

- If damage causes vehicle/equipment to be inoperable & unsafe, remove keys/accessibility from the vehicle OR place signage on the steering column stating "inoperable"

- If damage is done to a member/customer's property, refrain from making commitments & statements to repair, replace, etc. -- those decisions will be communicated through Division Director & General Manager

Employee Immediately Needs to Report Damage to Supervisor

- Employee needs to take photos of the damage & surrounding factors as soon as possible

****All damage needs to be reported to the Supervisor, no matter the severity****

Supervisor Reports Incident to their Division Director within 24 hours

- Supervisor should have details of the incident, photos and approximate value of the damage estimated to report to their Division Director within 24 hours.

- Supervisor & employees complete EverGRO Incident Reporting Form & email to,

incidents@evergrofs.com

- *Link below to form*

Division Director Reports Incident to the General Manager within 24 hours

- Division Director and General Manager will discuss steps to repair property.

Claim Submitted to SSC Insurance Exchange

- If approved by the General Manager, Division Director will complete and file a report and initiate a claim to The Captiv - GROWMARK

-- *See Policy Numbers above to use when filing claim*

The Captiv - GROWMARK Contact Information

During Business Hours:

- Email Claims to: growmark-fs@sedgwick.com
- Accident Call Number: (630) 245-7089
- Auto/General Liability/Property Claims – Cottingham Butler Claim Services (CBCS)
 - o Joel King – Senior Advisor, Risk Finance & Insurance – GROWMARK
 - (309) 557-6096 or jdking@growmark.com
- Workers' Compensation Claims- Through EMC Insurance
 - o Joel King – Senior Advisor, Risk Finance & Insurance – GROWMARK
 - (309) 557-6096 or jdking@growmark.com

Property Claims

- EverGRO's Policy Number
MWZY 317926 25

General Liability Claims

- EverGRO's Policy Number
MWZY 318743 25

Automobile Liability Claims

- EverGRO's Policy Number
MWTB 318744 25

Worker's Comp Claims

- EverGRO's Policy Number
EMC - 6H66958

****Policies are Effective: 9/1/2025 – 9/1/2026****