

# Florida Municipal Insurance Trust Matching Safety Grant Fund Program

2018-2019



*If approved, you can expect to receive your FMIT Matching Safety Grant Check within 6-8 weeks from quarter end.*

## **Fund Year 2018-2019**

1st Quarter  
2nd Quarter  
3rd Quarter  
4th Quarter

October 1, 2018 to December 31, 2018  
January 1, 2019 to March 30, 2019  
April 1, 2019 to June 30, 2019  
July 1, 2019 to September 30, 2019

## Application

Name of the Public Entity: \_\_\_\_\_

Address: \_\_\_\_\_

Safety Grant Coordinator: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

FMIT Fund Your Entity Participates In: Workers' Compensation   
Property/Liability   
Both

Total Expended Workers' Compensation \$ \_\_\_\_\_

Total Expended Property/Liability \$ \_\_\_\_\_

### For Office Use Only:

50% of total approved under Workers' Compensation \$ \_\_\_\_\_

50% of total approved under Property/Liability \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Insurance Decision Maker's Signature, Title and Date:

\_\_\_\_\_

Safety Grant Coordinator's Signature, Title and Date:

\_\_\_\_\_



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What FMIT Risk and Safety Management classes have your entity's employees attended? If none, indicate none:

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Attach documentation of the purchase which includes invoices or receipts from suppliers. For those applications of proposed projects that a safety grant is needed for approval, a written estimate from the vendor is required. Listing of supporting documentation:

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