



## COR® Reciprocity Compliance Declaration

Company Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**COR® Certification issued by:** \_\_\_\_\_

COR® Certification # \_\_\_\_\_

CFCSA Host Association \_\_\_\_\_

**Does your company currently have any active worksite(s) in the Yukon?**      Yes      No

### Declaration

The information provided in support of receiving COR® Reciprocity from the Construction Safety Association is true and valid. As a requirement of applying for COR® Reciprocity, our company does not have a permanent base of operation or active work in the Yukon.

**UPON ARRIVAL AND WORK IN THE YUKON:**

We will notify NSNY of our arrival and will implement our safety and health management system in accordance with the National COR® Accreditation Standard, including the legislative requirements specific to all Yukon's contractors.

We will follow the process to achieve COR® Certification from NSNY, which includes the completion of an external audit on the active Yukon worksite(s) and completion of required Yukon COR® training.

Print Name: \_\_\_\_\_

Print Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_