



**SAFETY, HEALTH AND LOSS CONTROL CONSULTANT**

**1. SERVICES**

**Senior Consultant Rate \$155 per hour for all service listed below:**

- Investigation/Reconstruction
- Case Evaluation/Report Preparation
- Deposition/Testimony
- Investigation and Research
- Safety Consulting
- PSM/RMP Consulting
- Safety Training
- Loss Control Audits

**Associate Consultant Rate \$120 per hour for all service listed below:**

- Investigation/Reconstruction
- Case Evaluation/Report Preparation
- Deposition/Testimony
- Investigation and Research
- Safety Consulting
- PSM/RMP Consulting
- Safety Training
- Loss Control Audits

**Junior Consultant Rate \$75 per hour for all service listed below:**

- Investigation/Reconstruction
- Case Evaluation/Report Preparation
- Deposition/Testimony
- Investigation and Research
- Safety Consulting
- PSM/RMP Consulting
- Safety Training
- Loss Control Audits

**Clerical Schedule Rate \$50 per hour for all service listed below:**

- General Clerical



**2. DIRECT EXPENSES ARE BILLED AT COST PLUS 5%**

2.1 All travel expenses, meals and lodging, supplies, equipment usage/rental, and other direct expenses.

**3. INVOICING AND PAYMENT TERMS**

3.1 All invoices will be presented monthly as a compilation of time and material charges in accord with this schedule and are due and payable upon receipt. A monthly charge of 1.5% will be added on any unpaid balance after thirty days from date of invoice.

**4. LIMIT OF LIABILITY**

4.1 Consultant provides services at the direction of the Client, and Client agrees to limit Consultant's Liability to the amount of fees received by Consultant for services rendered on project. Client agrees to indemnify and hold harmless Consultant for all claims against Consultant arising from Consultant's activities on the project.

4.2 The Client is: (check one)

- Required to pay a **Retainer** in the amount of \$2500 to the Consultant as an advance on future Services to be provided ("Retainer").

The Retainer is: (check one)  - Refundable.  - Non-Refundable.

- Not required to pay a Retainer before the Consultant is able to commence work.

Please return a signed copy of this fee schedule as acknowledgment and acceptance of the terms and conditions contained herein for consulting services and as authorization for Bruner Safety Consulting to commence work on the project.

**Client:**

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

Printed Name: \_\_\_\_\_

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

**Bruner Safety Consulting:**

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

Printed Name: \_\_\_\_\_

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