

1. ITA Login Page

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U.S. DEPARTMENT OF LABOR

Occupational Safety and Health Administration

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[Injury Reporting](#) / Injury Tracking Application Login



Log In to OSHA's Injury Tracking Application (ITA)

[Sign in with](#)  LOGIN.GOV

OR

[New User? Create an ITA Account](#)

Get help submitting your injury and illness data

- First time using the ITA, or looking for help? Start at [OSHA's Injury Reporting page](#)
- Have a question about the requirements or using the ITA? Review the [ITA Frequently Asked Questions](#)
- Questions about recordkeeping? Visit [OSHA's Recordkeeping page](#)
- Need assistance? Submit a [Help Desk ticket](#)
- Looking for OSHA's publicly available ITA data? Visit [OSHA's ITA Data page](#)

You are about to access a U.S. Government computer/information system. Access to this system is restricted to authorized users only. Unauthorized access, use, or modification of this computer system or of the data contained herein, or in transit to/from this system, may constitute a violation of [Title 18, United States Code, Section 1030](#) and other federal or state criminal and civil laws. These systems and equipment are subject to monitoring to ensure proper performance of applicable security features or procedures. Such monitoring may result in the acquisition, recording and analysis of all data being communicated, transmitted, processed or stored in this system by a user.

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OMB Control Number: 1218-0176

Public reporting for this collection of information is estimated anywhere from 3 minutes to 1 hour per response. This time includes reviewing the instructions, searching for existing data sources, gathering and maintaining the data, and completing and reviewing each collection of information requirement. Persons are not required to respond to the information collection request unless it displays a currently valid Office of Management and Budget Control Number. If you have any comments in regard this estimates or any other aspect of this information collection, including suggestions for reducing this burden, please send them to OSHA-PRA@dol.gov or to OSHA's Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210.

Expiration Date: April 30, 2028

OSHA 6-40.2

2. ITA home page

Injury Tracking Application Home

Injury Tracking Application Home

Injury Tracking Application
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Navigation Menu

OSHA Tip:
If you are submitting data for one or only a few establishments, it is much easier to enter the data manually through the ITA web form than to use the CSV or PDF option. Review the ITA User Guide for detailed information on how to submit data.

Steps for Successful Data Submission

- 1 Check the [ITA Coverage Application](#) to understand what data, if any, you are required to submit to OSHA.
- 2 Review the ITA User Guide.
- 3 Create an establishment (for new establishments or new users) OR update existing establishment profile(s).
- 4 Enter 300A data via the ITA web form, OR upload data with a CSV file, PDF, or with an API.
- 5 If required, enter 300/301 data via the ITA web form, OR upload data with a CSV file, PDF, or with an API.
- 6 View your Submission Report to ensure all establishments have submitted completed data.

USER GUIDE
Unsure what to do? Can't remember how to submit your data? Review our ITA User Guide.
[Review User Guide](#)

ESTABLISHMENT LIST
View existing or create new establishments and add, edit, or view data. You can also enter your data manually from this page.
[View Establishment List](#)

CSV OR PDF UPLOAD
Have a completed CSV or PDF file with your 300A and/or your 300/301 data? Upload your data here.
[Upload a CSV or PDF File](#)

API TOKEN
Access your authentication token for use in electronically transmitting data via API.
[View Your API Token](#)

3. Create Establishment (aka EIN page)

[Establishment List](#) / Create Establishment

Create Establishment

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Required Fields*

Establishment Name *

Each establishment name must be different from all other establishment names provided.

EIN

An Employer Identification Number (EIN) is also known as Federal Tax Identification Number and is a unique nine-digit number assigned by the IRS and is used to identify business entities operating in the United States.

Company Name

Please enter the name of the company that owns the establishment.

Establishment Address*

Please include the establishment's physical address, not a PO Box.

Establishment City* **Establishment State*** **Establishment Zipcode (5 or 9 digits)***

Establishment NAICS Industry Code or Description (start typing, then select) *

Begin typing either your 2012 NAICS code or the industry description, then select the correct value from the list. If you don't know your code and can't find it in the list, you can look it up [at census.gov](#).

What was the maximum number of employees at this establishment for this year? *

☐ Under 20 ☐ 20-99 ☐ 100-249 ☐ Over 250+

Please select the maximum number of employees (salaried, hourly, part-time, and seasonal workers) that this establishment had at ANY point during the filing year. This field can not be empty.

Is this establishment part of a public sector (government) entity? *

☐ No ☐ Yes - State Government ☐ Yes - Local Government

[Cancel](#) [SAVE](#) [Clear Form](#)

4. View establishment

Establishment Details: AGP Tech Center Michigan		Data Submission Progress	
ID: 1244593	NAICS: 327215	☒ 1. Create an Establishment	
ETIN: 453817255	Size: 20-99 employees	☒ 2. Add 300A Summary Data	
Company: AGP EGLASS CO	Government:	☒ 3. Submit Data to OSHA	
Address: 41600 Haggerty Cir S, Canton, MI, 48188	300A Status: Submitted	4. Review Confirmation Email	
Edit Details Remove			

Filing Year 2024 Status for AGP Tech Center Michigan

Submission Year
2024

Form 300A: Not Submitted

Form 300 and 301: Not required to file

Submit Injury and Illness Data

How would you like to enter and submit your establishment's injury and illness data?

Upload PDF Forms

Upload CSV

Manually Enter

Establishment Users			
Note: It may take 15 minutes for changes to reflect on the Establishment List and Establishment Details screens.			
First Name	Last Name	Email	Role

Illness & Injury Rates

Total Case Incidence Rate (TCR): ⓘ

Days Away Restrictions and Transfers (DART): ⓘ

5. Upload Injury/Illness file

[Injury Tracking Application Home](#) / Upload Injury And Illness Data

Upload Injury And Illness Data

Injury Tracking Application

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Navigation Menu

Select the type of file you would like to upload:

Select File Type

Note: You can upload your establishment's injury and illness data with a PDF, CSV, by manually entering your data, or through an API. If you choose to upload your records via OSHA's PDF Recordkeeping Package, you do not also have to upload a CSV file, unless you choose to.

Agree to the terms and conditions below

PUNISHMENT FOR UNLAWFUL STATEMENTS

It is unlawful to make any false statement, representation, or certification to an agency of the United States. Violations can be punished by a fine or by imprisonment of not more than five years, or by both. See 18 U.S.C. 1001(a); 29 U.S.C. 666(g).

☐ By checking this box, I certify that the information I have entered is true and correct to the best of my knowledge and belief.

Upload Your File

Upload

Cancel

6. Check the acknowledgement box that will enable the Upload button

OSHA ▾ STANDARDS ▾ ENFORCEMENT ▾ TOPICS ▾ HELP AND RESOURCES ▾ NEWS ▾

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Upload Injury And Illness Data

Injury Tracking Application

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Select the type of file you would like to upload:

PDF Recordkeeping Package

NOTE: Not all file uploads are required. If you select the PDF option, you do not have to proceed with the CSV uploads.

PDF Recordkeeping Package

For users who want to upload their completed [OSHA Recordkeeping Form Package](#). Please review the [PDF UPLOAD REQUIREMENTS](#) before proceeding.

Select an establishment for your PDF upload:

Plant 1

[Choose File](#) 1. Happy Path -300A and 300-301 success.pdf

NOTE: For PDF upload options, files cannot exceed 6.5 MB.

Step 3: Agree to the terms and conditions below

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☒ By checking this box, I certify that the information I have entered is true and correct to the best of my knowledge and belief.

Upload Your File

Upload

Cancel

7. Once the PDF file is uploaded, the success banner message appears on the screen which says an email confirmation will follow.

Upload Injury And Illness Data

Injury Tracking Application

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SUCCESS: You have submitted Plant 1's injury and illness data for 2025 on 7/24/2025 at 3:41PM. An email confirmation will be sent shortly.



Select the type of file you would like to upload:

PDF Recordkeeping Package

NOTE: Not all file uploads are required. If you select the PDF option, you do not have to proceed with the CSV uploads.

PDF Recordkeeping Package

For users who want to upload their completed [OSHA Recordkeeping Form Package](#). Please review the [PDF UPLOAD REQUIREMENTS](#) before proceeding.

Select an establishment for your PDF upload:

Plant 1

Choose File

No file chosen

NOTE: For PDF upload options, files cannot exceed 6.5 MB.

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Upload Your File

Upload

Cancel

