

IBEW LOCAL 46 SALTING AGREEMENT

(Member/Applicant for Membership)

ć	and IBE	EW Local 46 (Union) a	agrees as fo	ollows	S:						
1.	The	Member/Applicant	agrees	to	make	himself/herself			employment mployer).	at:	
2.	This A	This Agreement covers such work when approved in writing by the Union's Business Manager.									
3.	The Member/Applicant understands that he/she is representing the IBEW and as such will conduct himself/herself in a professional manner at all times. This includes showing up for work every day and being on time. If, for some unforeseen reason, the Member/Applicant will not be at work on a given day, the Member/Applicant will not only notify the employer but the Local #46 Organizer as well. Member/Applicant will exert his/her best efforts when performing electrical work for the contractor. During paid work time, the Member/Applicant will not engage in any Union organizational activities.										
4.	During non-paid breaks and outside of scheduled work hours, the Member/Applicant will attempt to educate non-union electricians employed by the firm, of the benefits of Union membership. However, the Member/Applicant will make no overtures to any individuals employed by the firm without first speaking with the Local #46 Organizer. The Member/Applicant will, at all times, refrain from engaging in any abusive or threatening conduct.										
5.	If the Member/Applicant who is signed to Classification:										
6.	No charges will be processed against the Member/Applicant on account of his/her employment by Contractor provided, however, that the Member/Applicant will terminate such employment effective upon fifteenth (15 th) calendar day after notice from the Union. This Agreement may be terminated by either p upon fifteen (15) calendar days notice.									n the	
7.		This Agreement will be reviewed monthly by the Business Manager to determine both eligibility and if the subsidy is to be continued for organizing.									
8.	. The Member/Applicant will return to the Local Union 46 Dispatch Office within three (3) days after ceasing employment and will present their final check stub from the non-Union employer.										
	Member's Signature					Organizer's Signature					
		Union Card #		Date							
		Date									

PRINT LEGIBLY **FIRST NAME** LAST NAME **NICKNAME** MI YOUR HOME LOCAL UNION CLASSIFICATION (JOURNEY WIREMAN, JOURNEY TECHNICIAN, ETC.) WASHINGTON STATE ELECTRICAL LICENSE? YES / NO **TYPE CELL PHONE** HOME PHONE **WORK PHONE** FAX# **EMAIL ADDRESS** MAILING ADDRESS ZIP CODE STATE CITY SSN **BIRTH DATE** HAVE YOU BEEN TO A COMET CLASS? YES NO WHEN / WHERE

PLEASE SUBMIT A PHOTOCOPY OF YOUR DRIVER'S LICENSE, ELECTRICAL LICENSE, AND YOUR DUES RECEIPT.

PLEASE COMPLETE BOTH SIDES