

# LABORGRAM

ASSOCIATION OF CONTRACTING PLUMBERS OF THE CITY OF NEW YORK, INC.  
44 West 28th Street, 12th Floor, New York, N.Y. 10001 212-481-4580 Fax 212-481-7185 www.acpcny.org

~~—September 24, 2012~~ UPDATED July 30, 2013  
New material is italicized

TO: ALL MEMBERS AND PROMOTION FUND CONTRIBUTORS

## “MES” DIVISION - HIRING AND OTHER ISSUES

Dear Contributor,

Many Employers have recently been contacted by Plumbers Local Union #1 (“Local #1”) regarding “MES” Hiring, Staffing and Work Practices. Accordingly, the Association wants to remind Employers of their rights and obligations under the “MES” Division Collective Bargaining Agreement.

Article 1, Section 3 of the “MES” Division Collective Bargaining Agreement states --

**SECTION 3.** Upon hiring any Journeymen or Helpers an Employer **MUST** notify the Union which **SHALL** issue a temporary membership card valid for 60 days. Thereafter, in order to continue employment the Employee must be sponsored by such Employer and **SHALL** be accepted as a member of the Local Union. (*emphasis supplied*)

It is therefore very clear that the final decision making authority of hiring the “MES” workforce lies with the Employer. Local #1 has sought to standardize the hiring process with the implementation of a form. This form is a “Notification Form” from the Employer to Local #1 of the Employer’s decision (see attached). Approval by Local #1 is **not** required. Also be advised that the Helper classification is determined by the rate of pay as indicated on the form. Meaning that if you want someone to be classified as a First Term, First Year Helper, you should indicate \$10.00. Providing the background/experience of the Employee is **not** a requirement except that the United Association Constitution provides that someone cannot be classified as an “MES” Journeyman unless they have five years of experience in the trade.

Employers have also reported that Local #1 has been requesting to meet with their "MES" Members at the shop and on the Employer's time. Employers can, of course, agree to that request. Employers can also help Local #1 advise "MES" Members of the dates of "MES" Union meetings which are scheduled after work. Local #1 can discuss any Union issues with them during those meetings.

*Also be advised that the Hiring/Notification Application Form has been revised with 2 changes (copy of the updated form is attached). The first change is that the form will no longer be accepted if faxed; it **MUST** be emailed back to Local #1. The second change is the addition of a question asking whether the individual has a valid OSHA 10 card. **AS A REMINDER:***

*NEW HELPERS: Upon hiring of a new Helper, the Helper will subsequently be advised by the Union that they must obtain OSHA-10 training in order to be accepted as a Local #1 member (i.e. an Employer may choose to "sponsor" a Helper as a member of Local #1 60 days after initial hiring). The Executive Board of Local #1 will not accept any Helper as a member unless proof is provided by the prospective member that he/she successfully completed an approved OSHA-10 course within the previous four (4) years. In other words a new Helper does not need to have an OSHA-10 card upon hiring but must have the OSHA-10 before acceptance in the Union.*

Please call the Association (212-481-4580) with regard to any questions you may have on this topic.

Sincerely,

Stewart O'Brien

- cc: Andru Coren                      President
- Ralph DeMartino              Vice President
- Thomas Maniuszko            Treasurer
- John M. Botto                  Secretary
- Eugene Boccieri              Immediate Past President
- Raymond G. McGuire        Counsel
- John J. Murphy                Business Manager
- Richard Garner                Business Agent

- Association of Contracting Plumbers  
of the City of New York, Inc.
- "                      "                      "
- "                      "                      "
- "                      "                      "
- "                      "                      "
- "                      "                      "
- Plumbers Local Union #1
- "                      "                      "



# PLUMBERS LOCAL UNION NO. 1 SERVICE DIVISION HIRING/NOTIFICATION APPLICATION FORM

PLEASE FILL OUT THE FOLLOWING FORM AND  
EMAIL BACK TO [jkim@ualocal1.org](mailto:jkim@ualocal1.org)

PLEASE PRINT CLEARLY

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

|   |        |                                    |  |
|---|--------|------------------------------------|--|
| EMPLOYER (COMPANY) NAME:                |        | MASTER PLUMBER'S NAME AND NUMBER:  |  |
| STREET ADDRESS:                         |        |                                    |  |
| CITY:                                   | STATE: | ZIP:                               |  |
| AUTHORIZED REPRESENTATIVE (PRINT NAME): |        | AUTHORIZED REPRESENTATIVE (TITLE): |  |
| PHONE:                                  |        | FAX:                               |  |
| SIGNATURE OF AUTHORIZED REPRESENTATIVE: |        | E-MAIL:                            |  |

**ABOVE NAMED EMPLOYER IS HIRING  SPONSORING  THE FOLLOWING PERSON:**

**DOES THIS INDIVIDUAL HAVE A VALID OSHA 10 CARD? Y \_\_\_ N \_\_\_**

**IF YES, WHAT IS THE DATE OF ISSUE OF THE CARD? \_\_\_\_\_**

|  |   |      |
|--|---|------|
| NAME:  |   |      |
| S.S. #:  | DATE OF BIRTH:  |      |
| STREET ADDRESS:  |   |      |
| CITY:  | STATE:  | ZIP: |
| HOME PHONE #:  | CELL PHONE #:   |      |
| <b>CLASSIFICATION</b><br><b>TEMPORARY MEMBERSHIP CARD VALID FOR 60 DAYS</b><br><br>HELPER YEAR 1 TERM 1 <input type="checkbox"/> HELPER YEAR 3 <input type="checkbox"/><br>HELPER YEAR 1 TERM 2 <input type="checkbox"/> HELPER YEAR 4 <input type="checkbox"/><br>HELPER YEAR 2 <input type="checkbox"/> HELPER YEAR 5 <input type="checkbox"/><br>JOURNEYMAN <input type="checkbox"/> (UA-MS) <input type="checkbox"/> | PAST TRADE RELATED EXPERIENCE (IN YEARS) _____<br><br>IS THIS PERSON CURRENTLY EMPLOYED BY YOU? Y ___ N ___<br><br>IF YES, DATE OF HIRE _____ / _____ / _____<br><br>IF YES, AT WHAT WAGE RATE? (HELPERS ONLY) \$ _____ PER HR. |      |

**FOR OFFICE USE ONLY**

|                     |                    |                       |
|---------------------|--------------------|-----------------------|
| SUBMITTED ON: _____ | REVIEWED BY: _____ | FOLLOWED UP ON: _____ |
|---------------------|--------------------|-----------------------|