



UNITED ASSOCIATION
Local Union No. 412
www.ualocal412.org

Request for Manpower

Deadline: 2:30 p.m.
Monday-Friday the day before
dispatch calls are placed.

Date: _____ Company Name/Contractor: _____

Requestor's Name: _____

Requestor's Phone: _____ Requestor's Email: _____

Contact Person: _____

Contact's Phone: _____ Contact's Email: _____

Type of Work:

COMMERCIAL INDUSTRIAL RESIDENTIAL

Duration of Job*:

LONG SHORT * **Short-** Employer agrees to terminate employee(s) hired for a short call with a reduction in force within a maximum of 21 consecutive calendar days, including start date, NO EXCEPTIONS.

Manpower Needed and Quantity:

FOREMAN Name: _____

General Foreman Name: _____

JOURNEYMAN

PLUMBER(S) _____ PIPEFITTER(S) _____ WELDER(S) _____

TRADESMAN _____ SERVICEMAN _____ REFRIGERATION _____

Special Skills Requirements & Special Requests:

OSHA UA Certified Welder (indicate UA #) _____ Q-Clear L-Clear

Passport/Birth Certificate Driver's License Able to Pass a Background Check

Other (Please Indicate) _____

APPRENTICE

ANY or Specific Year(s) (indicate below)

1.0 _____ 1.5 _____ 2.0 _____ 2.5 _____ 3.0 _____

3.5 _____ 4.0 _____ 4.5 _____ 5.0 _____ 5.5 _____

Drug Test Prescreen Required:

YES NO

Testing Facility Name & Address: _____

Job Reporting Information:

Report Date: _____ Report/Start Time: _____

Report to:

SHOP JOB SITE

Job Site Location: _____

Job Site Address: _____

Job Contact Name: _____ Job Contact Phone: _____

(ONLY NEEDED IF REQUIRED TO REPORT TO SHOP)

Shop Location: _____

Shop Address: _____

Shop Contact Name: _____ Shop Contact Phone: _____