

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

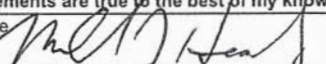
32-RC-259368

Date Filed

04/21/2020

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov/](http://www.nlrb.gov/), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

<b>2a. Name of Employer:</b> P.T.I. (ProfessionalTransportation, Inc.)		<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 3700 E. Morgan Avenue, Evansville, Indiana 47715	
<b>3a. Employer Representative - Name and Title:</b> Steve Kessler		<b>3b. Address (if same as 2b - state same):</b> Same	
<b>3c. Tel. No.</b> 800-471-2440	<b>3d. Cell No.</b>	<b>3e. Fax No.</b> 812-402-1104	<b>3f. E-Mail Address</b> Steve.Kessler@unitedevv.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Transportation		<b>4b. Principal Product or Service</b> Transportation of Rail Crews	
<b>5b. Description of Unit Involved:</b> Included: See Attached Description (Listing Multiple Locations in Two States) Excluded: See Attached Exclusions		<b>5a. City and State where unit is located:</b> California and Nevada	
<b>6a. Number of Employees in Unit:</b> 97		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Check One:</b> <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 3/3 & 6 2020 and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state)</b> None		<b>8b. Address:</b>	
<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any:</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>
<b>9. Is there now a strike or picketing at the Employer's establishment(s) involved?</b> No <input checked="" type="checkbox"/> If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
<b>10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)</b>			
<b>10a. Name</b> None		<b>10b. Address</b>	
<b>10c. Tel. No.</b>		<b>10d. Cell No.</b>	
<b>10e. Fax No.</b>		<b>10f. E-Mail Address</b>	
<b>11. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
<b>11b. Election Date(s):</b> May 2020		<b>11c. Election Time(s):</b> N.A.	
<b>11d. Election Location(s):</b> N.A.			
<b>12a. Full Name of Petitioner (including local name and number):</b> U.E. Local 1077		<b>12b. Address (street and number, city, State and ZIP code):</b> c/o 831 East Garfield Avenue, Glendale, California 91205	
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):</b> United Electrical, Radio, and Machine Workers of America (c/o J. Burger)			
<b>12d. Tel. No.</b> 312-829-8300	<b>12e. Cell No.</b> 773-263-4341	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b> jburger@ueunion.org
<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title:</b> Michael J. Healey		<b>13b. Address (street and number, city, State and ZIP code):</b> 247 Fort Pitt Blvd., 4th Floor, Pittsburgh, PA. 15222	
<b>13c. Tel. No.</b> 412-391-7711	<b>13d. Cell No.</b> 412-760-0342	<b>13e. Fax No.</b> 412-281-9509	<b>13f. E-Mail Address</b> mike@unionlawyers.net
<b>I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.</b>			
<b>Name (Print)</b> Michael J. Healey		<b>Signature</b> 	<b>Title</b> Attorney
		<b>Date</b> 4/21/2020	

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

## PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

**ATTACHMENT TO RC PETITION:****NO. 5(b): DESCRIPTION OF THE UNIT INVOLVED**

**INCLUDED:** "All full time and regular part time road drivers, yard drivers ,radius drivers, shuttle drivers, lead drivers, yard managers, and yard coordinators employed by the Employer at, or out of the rail yards located in California and Nevada including at the following locations : Bakersfield, Fresno, Stockton, Lathrop, Oakland, San Jose, Roseville, Dunsmuir, and Portola, in California; and Parks and Winnemucca in Nevada.

**EXCLUDED:** "All supervisors, guards, and confidential employees as defined in the Act."



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. <b>32-RC-259399</b>	Date Filed <b>04/21/2020</b>

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

<b>2a. Name of Employer</b> Enel Green Power North America, Inc.		<b>2b. Address(es) of Establishment(s) involved</b> (Street and number, city, State, ZIP code) 4785 Lawrence Ln, Fallon, NV 89406; 1185 East Sulphurdale Rd, Cove Fort, UT 84713	
<b>3a. Employer Representative</b> - Name and Title Charles Salo, Regional Manager		<b>3b. Address</b> (If same as 2b - state same) 200 S Virginia St, Suite 400, Reno, NV 89501	
<b>3c. Tel. No.</b> (978) 447-3914	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> chuck.salo@enel.com
<b>4a. Type of Establishment</b> (Factory, mine, wholesaler, etc.) Power generation plants		<b>4b. Principal product or service</b> Electric power generation	
<b>5b. Description of Unit Involved</b> <b>Included:</b> All full time and regular part time control room operators, I&E technicians, plant technicians, and maintenance technicians employed by the Employer. <b>Excluded:</b> Supervisors and Managers as defined in the Act, Clerical employees, security guards and officers.		<b>5a. City and State where unit is located:</b> Fallon, NV; Cove Fort, UT	
		<b>6a. No. of Employees in Unit:</b> 16	
		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

**Check One:** ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 4/21/2020 and Employer declined recognition on or about no reply (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent</b> (If none, so state). None.		<b>8b. Address</b>	
<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any</b> (Month, Day, Year)

**9. Is there now a strike or picketing at the Employer's establishment(s) involved?** No. If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above.** (If none, so state)

<b>10a. Name</b> None.	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.  
**11a. Election Type:** ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

<b>11b. Election Date(s):</b> voting period 5/6/20-5/20/20; count 5/22/20	<b>11c. Election Time(s):</b>	<b>11d. Election Location(s):</b>
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**12a. Full Name of Petitioner (including local name and number)**  
International Brotherhood of Electrical Workers, Local Union 1245

**12b. Address (street and number, city, state, and ZIP code)**  
30 Orange Tree Circle, Vacaville, CA 95687

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent** (if none, so state)  
International Brotherhood of Electrical Workers, AFL-CIO

<b>12d. Tel. No.</b> (707) 452-2700	<b>12e. Cell No.</b> (916) 439-9937	<b>12f. Fax No.</b> (707) 452-2701	<b>12g. E-Mail Address</b> rct8@ibew1245.com
<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title</b> Rick Thompson, Organizer		<b>13b. Address (street and number, city, state, and ZIP code)</b> 30 Orange Tree Circle, Vacaville, CA 95687	
<b>13c. Tel. No.</b> (916) 439-9937	<b>13d. Cell No.</b> (916) 439-9937	<b>13e. Fax No.</b>	<b>13f. E-Mail Address</b> rct8@ibew1245.com

**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> Rick Thompson	<b>Signature</b> 	<b>Title</b> Organizer	<b>Date</b> April 21, 2020
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

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