

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

12-RC-230899

Date Filed

11-13-18

**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.**

**2a. Name of Employer:**  
Triumph Aerospace Structures

**2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):**  
.1801 SE Airport Rd., Stuart, FL 34996

**3a. Employer Representative - Name and Title:**  
Curt Heitkamp, Site Plant Manager

**3b. Address (if same as 2b - state same):**  
Same

**3c. Tel. No.**  
772-220-5300

**3d. Cell No.**

**3e. Fax No.**

**3f. E-Mail Address**  
clheitkamp@triumphgroup.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Factor

**4b. Principal Product or Service**  
Aircraft Parts

**5a. City and State where unit is located:**  
Stuart, FL

**5b. Description of Unit Involved:**  
**Included:**

Full and Part Time Hourly Production, Quality, Warehouse and Maintenance employees

**Excluded:**

All other employees, Guards, Salary, and Supervisors as define in the NLRA

**6a. Number of Employees in Unit:**  
245

**6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?** ☒ Yes ☐ No

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 11-13-2018 and Employer declined recognition on or about (Date) (If no reply received, so state).  
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

**8a. Name of Recognized or Certified Bargaining Agent (If none, so state)**

**8b. Address:**

**8c. Tel. No.**

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any:**

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (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)**

**10a. Name**

**10b. Address**

**10c. Tel. No.**

**10d. Cell No.**

**10e. Fax No.**

**10f. E-Mail Address**

**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

**11b. Election Date(s):**  
11-29-2018

**11c. Election Time(s):**  
7:00am - 9:00am, 12:30pm - 2:30pm

**11d. Election Location(s):**  
Market Place Room

**12a. Full Name of Petitioner (including local name and number):**  
International Automobile, Aerospace, Agriculture Implement Workers of America, International Union, UAW

**12b. Address (street and number, city, State and ZIP code):**  
8000 East Jefferson Ave., Detroit, MI 48214

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):**  
International Automobile, Aerospace, Agriculture Implement Workers of America, International Union UAW

**12d. Tel. No.**  
313-926-5461

**12e. Cell No.**

**12f. Fax No.**

**12g. E-Mail Address**

**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

**13a. Name and Title:**  
Chris Needham, International Representative

**13b. Address (street and number, city, State and ZIP code):**  
8000 East Jefferson Ave., Detroit, MI 48214

**13c. Tel. No.**

**13d. Cell No.**  
317-201-9587

**13e. Fax No.**

**13f. E-Mail Address**  
cneedham@uaw.net

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

Name (Print)

Chris Needham

Signature

Chris Needham

Title

International Rep

Date

11/13/18

**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.

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.  
12-RC-231088Date Filed  
11/14/2018

**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.

<b>1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE</b> - 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. <b>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>			
<b>2a. Name of Employer:</b> Nursing Center at Mercy		<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 3761 S Miami Ave, Miami, Florida 33133	
<b>3a. Employer Representative - Name and Title:</b> Sam Chevin, Administrator		<b>3b. Address (if same as 2b - state same):</b> Same	
<b>3c. Tel. No.</b> 305-854-1110	<b>3d. Cell No.</b>	<b>3e. Fax No.</b> 305-854-6748	<b>3f. E-Mail Address</b>
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Nursing Center		<b>4b. Principal Product or Service</b> Healthcare	<b>5a. City and State where unit is located:</b> Florida
<b>5b. Description of Unit Involved:</b> <b>Included:</b> See attached <b>Excluded:</b> See attached		<b>6a. Number of Employees in Unit:</b> 96 <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) _____ 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> _____ 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>		<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: The proposed unit and election are appropriate			<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
<b>11b. Election Date(s):</b> December 13, 2018		<b>11c. Election Time(s):</b> 5:30 am - 9:00 am; 1:30 pm - 5:00 pm	<b>11d. Election Location(s):</b> Nursing Center at Mercy, Conference Room
<b>12a. Full Name of Petitioner (including local name and number):</b> 1199SEIU, United Healthcare Workers East		<b>12b. Address (street and number, city, State and ZIP code):</b> 2881 Corporate Way, Miramar, Florida 33025	
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):</b> Service Employees International Union			
<b>12d. Tel. No.</b> 305-623-3000	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> 305-826-1604	<b>12g. E-Mail Address</b>
<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> Lucia Piva, Esq., Union Attorney		<b>13b. Address (street and number, city, State and ZIP code):</b> 9860 SW 72 Street, Miami, Florida 33173	
<b>13c. Tel. No.</b> 305-412-8322	<b>13d. Cell No.</b> 786-443-6187	<b>13e. Fax No.</b> 305-412-8299	<b>13f. E-Mail Address</b> lpiva@phillipsrichard.com
<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> LUCIA PIVA		<b>Signature</b> 	<b>Title</b> Union Attorney <b>Date</b> 11/14/18

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.

**5b. Description of Unit Involved**

Included:

- Certified Nursing Assistants (CNA)
- Housekeeping
- Dietary
- Activities
- Laundry
- Maintenance
- Receptionist
- Unit Secretary

Excluded: All other employees

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RD PETITION

DO NOT WRITE IN THIS SPACE

Case No.

12-RD-230680

Date Filed

11/07/2018

**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 7 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.

<b>1. PURPOSE OF THIS PETITION: RD-DECERTIFICATION (REMOVAL OF REPRESENTATIVE)</b> - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. 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> Palmetto Electric Inc.		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code)</b> 1150 W. Moody Blvd., Bunnell, FL, 32110	
<b>3a. Employer Representative - Name and Title</b> William F. Dudley		<b>3b. Address (If same as 2b - state same)</b> 1100 COUNTY RD 302 BUNNELL, FL, 32110	
<b>3c. Tel. No.</b> 386-437-3068	<b>3d. Fax No.</b> 386-437-3069	<b>3e. Cell No.</b> 386-931-0853	<b>3f. E-Mail Address</b> frank@palmettoelectricinc.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Electrical			<b>4b. Principal product or service</b> Electrical
<b>5a. Description of Unit Involved</b> Included: Electrical Employees Excluded: Office Employees			<b>5b. City and State where unit is located:</b> Bunnell, FL
<b>6. No. of Employees in Unit</b> 27	<b>7. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>8a. Name of Recognized or Certified Bargaining Agent</b> IBEW Local 756 Daniel P. Hunt		<b>8b. Affiliation, if any</b>	
<b>8c. Address</b> 5901 S Williamson Boulevard Port Orange, FL 32128		<b>8d. Tel. No.</b> (386) 756-2756	<b>8e. Cell No.</b>
		<b>8f. Fax No.</b> (386) 756-2785	<b>8g. E-Mail Address</b> ibew756@msn.com
<b>9. Date of Recognition or Certification</b>		<b>10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>	
<b>11a. Is there now a strike or picketing at the Employer's establishment(s) involved?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>11b. If so, approximately how many employees are participating?</b>	
<b>11c. The Employer has been picketed by or on behalf of (Insert Name)</b> (Insert Address)		a labor organization, of since (Month, Day, Year)	
<b>12. Organizations or individuals other than those named in items 8 and 11c, 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 5 above. (If none, so state)</b>			
<b>12a. Name</b> none	<b>12b. Address</b>	<b>12c. Tel. No.</b>	<b>12d. Fax No.</b>
		<b>12e. Cell No.</b>	<b>12f. E-Mail Address</b>
<b>13. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election.		<b>13a. Election Type:</b> <input type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
<b>13b. Election Date(s)</b> M-F	<b>13c. Election Time(s)</b> 7:30-4:00	<b>13d. Election Location(s)</b> 1150 W. Moody Blvd, Bunnell, FL	
<b>14. Full Name of Petitioner</b> (b) (6), (b) (7)(C)			
<b>14a. Address (Street and number, city, state, ZIP code)</b> (b) (6), (b) (7)(C)		<b>14b. Tel. No.</b> (b) (6), (b) (7)(C)	<b>14c. Fax No.</b>
		<b>14d. Cell No.</b> (b) (6), (b) (7)(C)	<b>14e. E-Mail Address</b> (b) (6), (b) (7)(C)
<b>14f. Affiliation, if any</b> Employee			
<b>15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>15a. Name</b>		<b>15b. Title</b>	
<b>15c. Address (Street and number, city, state, ZIP code)</b> (b) (6), (b) (7)(C)		<b>15d. Tel. No.</b>	<b>15e. Fax No.</b>
		<b>15f. Cell No.</b>	<b>15g. E-Mail Address</b>
<b>I declare that I have read the above petition and its contents, and I believe the facts stated therein to be true to my knowledge and belief.</b>			
<b>Name (Print)</b> (b) (6), (b) (7)(C)		<b>Title</b> (b) (6), (b) (7)(C)	<b>Date Filed</b> 11-07-2018

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

DO NOT WRITE IN THIS SPACE	
Case No.	Date Filed
12-RD-231261	11/16/18

**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: RD-DECERTIFICATION (REMOVAL OF REPRESENTATIVE)** - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. 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.

2a. Name of Employer PALMETTO ELECTRIC INC		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1150 W Moody Blvd Ste 101 FL Bunnell 32110-6941	
3a. Employer Representative - Name and Title Frank Dudley Jr. Owner		3b. Address (If same as 2b - state same) 1100 County Road 302 FL Bunnell 32110-7900	
3c. Tel. No. (386) 437-3068	3d. Cell No. (386) 931-0853	3e. Fax No.	3f. E-Mail Address frank@palmettoelectricinc.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Construction		4b. Principal product or service Electrical	
		5a. City and State where unit is located: Bunnell, FL	

**5b. Description of Unit Involved**

Included: See Attached Page 2 for additional details

Excluded: See Attached Page 2 for additional details

6a. No. of Employees in Unit: 28
6b. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).

☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent Ibew Local 756 Dan Hunt		8b. Address 5901 S Williamson Blvd FL Port Orange 32128-6107	
8c. Tel No. (386) 756-2756	8d. Cell No.	8e. Fax No. (386) 756-2785	8f. E-Mail Address ibew756@msn.com
8g. Affiliation, if any Ibew local 756		8i. Expiration Date of Current or Most Recent Contract, if any (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 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)

10a. Name		10b. Address		10c. Tel. No.		10d. Cell No.	
				10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.				11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): 11-26-18		11c. Election Time(s): 7:30		11d. Election Location(s): 1150 W Moody Blvd Bunnell, FL			
12a. Full Name of Petitioner (b) (6), (b) (7)(C)				12b. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)			
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) none (b) (6), (b) (7)(C)							
12d. Tel No. (b) (6), (b) (7)(C)		12e. Cell No. (b) (6), (b) (7)(C)		12f. Fax No.		12g. E-Mail Address (b) (6), (b) (7)(C)	

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	
13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address

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

Name (Print) (b) (6), (b) (7)(C)	Signature (b) (6), (b) (7)(C)	Title	Date 11/15/2018 15:40:03
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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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Attachment

Employees Included  
Electrical Employees

Employees Excluded  
0

DO NOT WRITE IN THIS SPACE	
Case 12-RD-231261	Date Filed 11/16/18

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
**RM PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. <b>12-RM-231582</b>	Date Filed <b>11/23/2018</b>

**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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

**1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE** - One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. **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/Petitioner:</b> Heavy Materials, LLC - St. Croix Division	<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> #1 Estate Montpelier, St. Croix, U.S. Virgin Islands 00840; #9010 Estate Cottage, St. Croix, U.S. Virgin Islands 00820.
<b>3a. Employer/Petitioner Representative - Name and Title:</b> George H. T. Dudley, Esq.; Lisa Michelle Komives, Esq.	<b>3b. Address (if same as 2b - state same):</b> 1000 Fredriksberg Gade, St. Thomas, VI 00802

<b>3c. Tel. No.</b> 340-774-4422	<b>3d. Cell No.</b> 340-690-6172	<b>3e. Fax No.</b> 340-715-4400	<b>3f. E-Mail Address</b> gdudley@dtflaw.com
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Integrated quarry & concrete production facility	<b>4b. Principal Product or Service</b> Crushed aggregate & ready mix concrete
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<b>5a. Description of Unit Involved:</b> <b>Included:</b> See addendum <b>Excluded:</b> See addendum	<b>5b. City and State where unit is located:</b> <b>St. Croix, USVI</b> <b>6. Number of Employees in Unit:</b> 23
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Unless a charge alleging a violation of Section 8(b)(7) is pending, check **EITHER** item 7a or 7b, whichever is applicable  
☒ **7a.** A labor organization made a demand for recognition on the Employer/Petitioner on (Date) 11/02/18  
☐ **7b.** The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.

<b>8a. Name of Recognized or Certified Bargaining Agent - Name</b> Eugene Irish, Vice President	<b>8b. Affiliation, if any:</b> United I,S,T,P & GW of N.Am.				
<b>8c. Address:</b> P.O. Box 7630 Christiansted, VI 00823-7630	<table border="1"> <tr> <td><b>8d. Tel. No.</b> 340-773-6055</td> <td><b>8e. Cell No.</b></td> </tr> <tr> <td><b>8f. Fax No.</b> 340-773-6559</td> <td><b>8g. E-Mail Address</b> eirish@seafarers.org</td> </tr> </table>	<b>8d. Tel. No.</b> 340-773-6055	<b>8e. Cell No.</b>	<b>8f. Fax No.</b> 340-773-6559	<b>8g. E-Mail Address</b> eirish@seafarers.org
<b>8d. Tel. No.</b> 340-773-6055	<b>8e. Cell No.</b>				
<b>8f. Fax No.</b> 340-773-6559	<b>8g. E-Mail Address</b> eirish@seafarers.org				

<b>9. Date of Recognition or Certification</b> June 1, 1995	<b>10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b> 12/31/2021
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**11. 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) \_\_\_\_\_

**12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded recognition as representatives and other organization and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state)**  
IAMAW, AFL-CIO

<b>12a. Name and affiliation if any</b> Javier Almazan, Sr., GLR	<b>12b. Address</b> 690 East Lamar Boulevard, Suite 580 Arlington, TX 76011-1711	<b>12c. Tel. No.</b> 561-859-3889	<b>12d. Cell No.</b>
		<b>12e. Fax No.</b> 817-459-0102	<b>12f. E-Mail Address</b> jalmazan@iamaw.org

**13. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election:  
No preference as to the election type, date, time or location.

**13a. Election Type:**  
☐ Manual ☐ Mail ☐ Mixed Manual/Mail

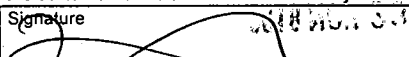
<b>13b. Election Date(s):</b> no preference	<b>13c. Election Time(s):</b> no preference	<b>13d. Election Location(s):</b> no preference
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**14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>14a. Name and Title:</b> George H.T. Dudley, Esq. and Lisa Michelle Komives, Esq. - Legal Counsel for Employer/Petitioner	<b>14b. Address (street and number, city, State and ZIP code):</b> Dudley, Topper and Feuerzeig LLP, 1000 Fredriksberg Gade, P.O. Box 756, St. Thomas, VI 00804
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<b>14c. Tel. No.</b> 340-774-4422	<b>14d. Cell No.</b> 340-690-6172	<b>14e. Fax No.</b> 340-715-4400	<b>14f. E-Mail Address</b> gdudley@dtflaw.com; lkomives@dtflaw.com
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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> Lisa Michelle Komives	<b>Signature</b> 	<b>Title</b> Legal Counsel-Employer/Petitioner	<b>Date</b> 11/16/18
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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**

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.

## **ADDENDUM TO HEAVY MATERIALS LLC'S RM PETITION**

### **Paragraph 5: Unit Involved**

Heavy Materials, LLC – St. Croix Division (“Heavy” or “Employer”) operates an integrated quarry and aggregate production facility combined with a ready-mix concrete production facility located on the island of St. Croix, U.S. Virgin Islands.

**Heavy Group I** consists of fifteen (15) unionized workers primarily employed at Heavy’s quarry and aggregate production facility and is represented by the United Industrial Workers of the Seafarers International Union of N.A., AFL-CIO (“UIW”) pursuant to a collective bargaining agreement dated December 23, 2016, which expires on December 31, 2021 (the “UIW CBA”). A copy of the roster of Heavy Group I members is attached hereto as **Exhibit A**. Under Article I of the UIW CBA, Heavy recognizes the UIW as the sole and exclusive bargaining representative of all its employees as certified by the National Labor Relations Board in Case No. 24-RM-265, including all service and maintenance employees, loader operators, truck drivers, construction, block, cement plant, quarry, ready mix concrete, production employees and mixer truck drivers employed by the Employer at its St. Croix operations as specified in the certification (the ‘Bargaining Unit’). Excluded from the Bargaining Unit are all Office, Clerical, Professionals, Timekeepers, Supervisors, and Guards as defined by the National Labor Relations Act.

Accordingly, the UIW CBA lists the Unit job classifications as: “Heavy Equipment Operator”; “Welder”; “Laborer”; “Mechanic”; “Mechanic Helper”; “Truck Driver”; “Leadman”; “Operator”; “Serviceman”; “Bodyman”; “Tireman”; “Concrete Mixer Truck Driver”; and “Crusher Operator.”

**Heavy Group II** consists of eight (8) unionized workers employed by Heavy primarily at its ready-mix concrete production facility on St. Croix, U.S.V.I. (located less than seven miles from the quarry facility). Heavy Group II is comprised of six (6) Concrete Mixer Truck Drivers, one (1)



Loader/Equipment Operator, and one (1) Yardman/Mechanic Helper. The concrete mixer truck drivers work primarily out of the ready-mix concrete production facility although the concrete truck drivers also frequently drive dump trucks out of the quarry and aggregate production facility and the mechanics and mechanic helpers in both groups work in both locations based on need. A copy of the roster of the Heavy Group II members is attached hereto as **Exhibit B**. On October 3, 2016, the National Labor Relations Board (the “Board”) certified the International Association of Machinists and Aerospace Workers, AFL-CIO (“IAMAW”) in Case No. 12-RC-183460 as the exclusive collective bargaining representative of Heavy Group II at a time when the ready-mix concrete production facility was owned and operated by a different company, Spartan Products, LLC (“Spartan”). Spartan and IAMAW began negotiating the terms of a collective bargaining agreement shortly after the Board certified the election but no such agreement was ever concluded. On July 1, 2018, the Spartan operation was merged into the Heavy operation on St. Croix and all former Spartan employees were hired by Heavy. The eight Spartan union workers hired by Heavy all have bargaining unit job classifications that fall within the scope of the Bargaining Unit as defined in the UIW CBA and as certified by the NLRB in Case No. 24-RM-265 *i.e.*, six are Concrete Mixer Truck Drivers, one is a Heavy Equipment Operator, and one is a Laborer/Mechanic Helper.

Heavy is a “successor employer” of the Heavy Group II employees as defined under Title 24 of the Virgin Islands Code.

On June 25, 2018, IAMAW announced that it refused to engage in Effects Bargaining and demanded to continue negotiating the terms of a collective bargaining agreement with Heavy as the successor employer of Spartan. Further, on November 2, 2018, IAMAW again demanded to

negotiate the terms of a collective bargaining agreement with Heavy. A copy of IAMAW's letter dated November 2, 2018, is attached for the Board's reference as **Exhibit C**.