IBEW Local 659 Members and Applicants
We are Still Here to Serve You.

Out of an abundance of caution, IBEW Local 659 is taking the CDC's advice and will implement the practice of Social Distancing.

Social Distancing means staying out of crowded places, avoiding group gatherings, and maintaining distance (approximately 6 feet or 2 meters) from others when possible.

The Union Hall will remain open as always to serve our members and signatory contractors but our dispatch window will be closed, except by appointment. Every effort to conduct Business normally be done in person should be done by alternative means such as email, phone, fax or text message.

The requirement to sign the Out of Work Books in person has been temporarily waved through May 1, 2020, as long as request and required documentation can be provided by alternative means. Our office staff will provide confirmation when utilizing alternative means to sign the Out of Work books. If you have any questions or concerns, please call the Dispatcher at 541-664-0800 to determine how we can best serve you.

If you need to sign the Books or pay your dues, please call the Hall to find the best options.

Phone: 541-664-0800
Fax: 541-664-0806
Dispatch Email: kathy@ibew659.org
Texting: 541-227-8330

You will receive notice confirming your request to be placed on the Books when utilizing the requested alternative methods.

If you have any questions or concerns, please call the Dispatcher to determine how we can best serve you.

Thank you, and stay safe.
In Solidarity
IBEW Local 659
IBEW LOCAL UNION 659

REGISTRATION INSTRUCTIONS FOR BOOKS

Temporary changes to the Referral Policy until further notice

Applicants may register for the out-of-work books by phone **AND** documents may be submitted by fax, email or text.

You will receive confirmation of book placement.

Email: ibew@ibew659.org ▲ Fax: 541-664-0806 ▲ Text: 541-227-8330

Provide certifications along with the required dues deduction authorization

CDL 1st Aid/CPR Flagger Card
(front & back side)
DUES DEDUCTION AUTHORIZATION

I hereby authorize and direct ________________ to deduct from my pay working dues in the amount set forth in the By-Laws of Local Union 659, and to pay same to said Local Union in accordance with the terms of the bargaining agreement between the Employer and the Union.

When working outside the jurisdiction of Local Union 659, the Employer is authorized to deduct working dues in the amount set forth in the By-Laws of the Local Union where the work is performed and to pay same to that Local Union.

This authorization is voluntarily made in order to pay my fair share of the Unions' cost of representing me for the purposes of collective bargaining, and this authorization is not conditioned on my present or future membership in the Union.

This authorization shall be irrevocable for a period of one year from the date hereof or until the termination date of said agreement, whichever occurs sooner, without regard to whether I am a member of the Union during that period, and I agree that this authorization shall be automatically renewed and irrevocable for successive periods of one year unless revoked by written notice to you and the Union within the ten (10) day period prior to the anniversary of this authorization. I understand that under current law the payments covered by this authorization are not deductible as charitable contributions for federal income tax purposes.

Copies of this authorization shall be treated as valid as the original.

Date: ___________________________  Signature: ______________________________________

________________________________________

PLEASE PRINT:
Name: ________________________________
Mailing Address:
_____________________________________
_____________________________________
Phone: ________________________________
Email: ________________________________
S.S.#: ________________________________
Local Union #: __________
Card Number: __________
Classification: ________________________
DUES DEDUCTION AUTHORIZATION

I hereby authorize and direct TREES LLC to deduct from my pay, an amount equal to the dues and initiation fees in the amounts fixed in accordance with the Bylaws of Local Union 659 and the Constitution of the International Brotherhood of Electrical Workers and to pay same to said Local Union in accordance with the terms of the bargaining agreement between the Employer and the Union.

This authorization is voluntarily made in order to pay my fair share of the Union’s cost of representing me for the purposes of collective bargaining, and this authorization is not conditioned on my present or future membership in the Union.

This authorization shall be irrevocable for a period of one year from the date hereof or until the termination date of said agreement, whichever occurs sooner, without regard to whether I am a member of the Union during that period, and I agree that this authorization shall be automatically renewed and irrevocable for successive periods of one year unless revoked by written notice to you and the Union within the ten (10) day period prior to the anniversary of this authorization. I understand that under current law the payments covered by this authorization are not deductible as charitable contributions for federal income tax purposes.

Printed Name

Signature

Date

Social Security Number

RETURN TO LOCAL 659
OUTSIDE INCLUDING LINE CLEARANCE TREE TRIMMING WORK (except Telephone)
ANNUAL RE-SIGN POLICY

AVAILABLE FOR WORK LISTS:  
GROUPS I, II, III, IV  
Journeyman Lineman and All Other Classifications

Applicants who are in compliance with the requirements of Article II (2.5) will be required to register required information on Books supplied by the Dispatcher.

Initial registration for all applicants shall be in person:

1. **Registration** may be at the Local Union 659 office located at 4480 Rogue Valley Hwy, Suite 3, Central Point, Oregon. Hours are Monday through Friday, 8:00 a.m. to 5:00 p.m. The office is closed at noon from 12:00-1:00 p.m.

2. **Registration** may be also be done at the regular Construction Unit meeting on the 2nd Saturday of each month @ Central Electrical Training Center, 33309 Hwy 99E, Tangent, Oregon – 9:00 a.m. to 11:00 a.m.

3. Applicants can sign one (1) out-of-work list.

4. In addition, an **annual registration** (in person) will be required in January of each year in the manner outlined in 1, 2 and 3 above.

Applicants once registered must update registration monthly. In order to remain on the out-of-work list you must update your name on the books by phone (541-664-0804), fax (541-664-0806) or in person in the week containing the second Wednesday (calendar attached). Applicants who fail to up-date by the last day of the week containing the second Wednesday will be removed from the out-of-work list.

**REMOVAL** from the available-for-work list will occur when:

1. **Applicant fails to re-sign in the week containing the second Wednesday of the month.**
2. Applicant has been dispatched for over one (1) week.
3. Applicant has turned down or been unavailable for 3 job offers.
4. Applicant voluntarily removes his/her self from the available list.
5. **Applicant fails to re-register (in person) in January each year.**

Applicants are responsible for keeping the Dispatcher informed, in writing of any change of address and/or telephone number where they can be reached.

**REGULAR DISPATCH HOURS:**

9:00 a.m. to noon  
Monday through Friday

**EMERGENCY DISPATCH:**

All other times  
(No turn-down)

**EXAMPLES OF EMERGENCY DISPATCH:**

1. Jurisdictional coverage.
2. Any emergency (i.e.: storm damage, loss of crew size, loss of work for customer, life and property)
1. Each applicant for referral shall be permitted to place his/her name on only one (1) out-of-work list.

2. I.B.E.W. MEMBERS MUST SHOW CURRENT DUES RECEIPT.

3. **Applicant must be on the books by 9 am to be eligible for dispatch the same day.**

4. When the Union Dispatcher is unable to contact the applicant, whose name is first on the out-of-work list, after making a reasonable attempt to do so, she/he may proceed to refer the next eligible applicant(s) in order of their place on the list.

5. Any applicant who accepts employment offering one (1) week of work (5 regular work days, but does not include overtime) or less shall not, thereby, lose his/her position on the out-of-work list, provided they report themselves available for work to the union on the next regular workday after his/her termination. An applicant who voluntarily quits, or is terminated for good cause in less than one (1) week, shall be required to re-register **in person** on the out-of-work list.

6. Any applicant accepting a work referral and, thereafter, not appearing at the time and place specified, shall notify the Union as soon as possible and shall be required to re-register **in person** with the Union.

7. All applicants must provide the necessary proof of qualification to be placed in their appropriate group.

8. Category I language, adopted December 23, 2008, states the following, “Once an applicant qualifies for, requests and is granted Group I status in any local union, he shall retain that status in the local union and shall not be required to requalify unless he qualifies for, requests and is granted Group I status in another local union. If that situation occurs, the applicant would have to requalify for Group I status in any previous local union(s) in which he enjoyed Group I status.”

9. An employee who has satisfied the standards established by this Referral Plan will retain (but not accumulate) his employment seniority under this Agreement in the following circumstances:

   (1) When an officer or a regular employee of this Local Union which requires full time in that position.

   (2) When an employee working for an Employer under the terms of this Agreement is assigned to a position outside the bargaining unit, but in the electrical industry.

   (3) When an employee is covered under the Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA).

10. These referral procedures and rules are in addition to the terms of the Collective Bargaining Agreement in effect for the employer to whom an applicant is dispatched. Any conflicts with the Collective bargaining Agreement shall be subject to negotiation.

11. Explanation of all referral rules will be made only by the Business Manager or his designated Representatives (not the office staff).

12. Any inquiries regarding this referral procedure should first be directed to the Dispatcher assigned to administer referral.

13. Referral procedures and rules shall be at the sole discretion of the Business Manager. Any change in the above procedures or rules, when posted, shall automatically become a part of this document.

Michael Scarminach, Business Manager and Financial Secretary
Dispatcher direct line: (541) 664-0804 - Fax: (541) 664-0806

Revised December 2019
Beginning January 6, 2020, employers, or their designated consortium/third-party administrator (C/TPA), will be required to conduct queries to check if current and prospective employees are prohibited from performing safety-sensitive functions, such as operating commercial motor vehicles (CMVs), due to an unresolved drug and alcohol program violation.

### THERE ARE TWO TYPES OF QUERIES:

<table>
<thead>
<tr>
<th>Limited Queries</th>
<th>Full Queries</th>
</tr>
</thead>
</table>

#### Consent Requirements

<table>
<thead>
<tr>
<th>Query Type</th>
<th>Reason for Query</th>
<th>Consent Requirements</th>
<th>Consent Responses and Required Actions</th>
<th>Query Results and Required Actions</th>
</tr>
</thead>
</table>
| **LIMITED QUERY** | Annual check on currently-employed driver OR Ad hoc/periodic check on driver | Outside the Clearinghouse May be electronic or wet signature Limited consent form must specify time range | Consent refused • Query cannot be conducted • Driver removed from safety-sensitive functions | No records found in the Clearinghouse for queried driver • No action required |}

Records found in the Clearinghouse for queried driver; full query needed

- Full query must be conducted for violation and/or return-to-duty (RTD) details to be released
- If full query is not conducted within 24 hours, driver is removed from safety-sensitive functions, including operating a CMV

| **FULL QUERY** | Pre-employment check on prospective driver OR Limited query returned records found for queried driver OR Ad hoc/periodic check on driver | Electronically within the Clearinghouse, for each full query for individual driver | Consent refused • Employer notified of refused consent • Query cannot be conducted • Driver cannot perform/removed from safety-sensitive functions | Prohibited • If driver has a violation and no negative RTD test result, driver is removed from safety-sensitive functions |

Consent provided

- Query conducted
- Full violation and/or RTD details released, if any

Not Prohibited

- If a driver has no violations, or a violation and a negative RTD test result, no action required
Limited Annual Queries for Currently-Employed Drivers

Driver written consent is provided outside the Clearinghouse

Employer submits limited query inside Clearinghouse

No record found in the Clearinghouse

Records found in the Clearinghouse

Full query must be conducted within 24 hours

Driver consent is provided electronically within the Clearinghouse

Driver consent refused

Violation found but also negative RTD test result

No action required

Violation found and no negative RTD test result

Driver removed from safety-sensitive functions

Driver identifies SAP in the Clearinghouse

SAP enters date of determination of eligibility for RTD testing in the Clearinghouse

C/TPA reports negative RTD test results in the Clearinghouse

Driver returns to safety-sensitive functions
Driver electronic consent is provided inside the Clearinghouse

Employer submits full query inside Clearinghouse

- No violations found
  - Driver can perform safety-sensitive functions

- Violation found but also negative RTD test result

- Violation found and no negative RTD test result
  - Driver cannot perform safety-sensitive functions

Full Pre employment Queries for New Hire Drivers