

REQUEST FOR WORKERS

LOCAL 179



CONTRACTOR NAME: _____

Phone Number _____

Email: _____

Turnaround or Shutdown Yes _____ No _____

Sub & Travel Yes _____ No _____

Coveralls Supplied Yes _____ No _____

S.C.O.T. Yes _____ No _____

Rights & Responsibilities Yes _____ No _____

Work to be Performed: _____

Date: _____

Requested by: _____

Report to: _____

Job Location: _____

Date Required: _____

Start Time: _____

Orientation Time: _____

Trade	Journeyman	Apprentice	Yr.
Steamfitter/Pipefitter	_____	_____	_____
Plumber	_____	_____	_____
Sprinklerfitter	_____	_____	_____
Basic Welder F3/4	_____	_____	_____
Stainless/Chrome Welder 6/5	_____	_____	_____
Refrigeration Mechanic	_____	_____	_____
Instrument Mechanic	_____	_____	_____
Gasfitter	_____	_____	_____
Pipefitter/Rigger	_____	_____	_____
Fiberglass	_____	_____	_____

HOURS	
5 X 8	()
4 X 10'S	() * Note
Other	_____

Day Shift	_____
Night Shift	_____

Approx. Duration	
_____ Days	
_____ Weeks Plus	
_____ Months Plus	
() Unknown	

Conditions of Employment are:

Rates: Industrial _____ Commercial _____
 GPC _____ Commercial Residential _____
 NMA _____ Refrigeration _____

“Strict Adherence to Contractor Safety Policy & Rules”

Special Requirements: _____

Notes: _____

Welder Classification - Legend			
<input type="checkbox"/> Welder	<input type="checkbox"/> SS Stick (F5)	<input type="checkbox"/> Inconel Stick (F43)	<input type="checkbox"/> Chrome Stick (F4)
<input type="checkbox"/> Carbon Stick (F4)	<input type="checkbox"/> B Welder (F3/F4)	<input type="checkbox"/> SS Tig (F6)	<input type="checkbox"/> Inconel Tig/Stick (F43/F43)
<input type="checkbox"/> Chrome Tig Stick (F6/F4)	<input type="checkbox"/> Carbon Tig/Stick (F6/F4)	<input type="checkbox"/> CWB Flux-cored	<input type="checkbox"/> SS Stick Overlay (F5)
<input type="checkbox"/> Inconel Stick Overlay (F43)	<input type="checkbox"/> Other - Specify	<input type="checkbox"/> SS Chrome Tig Stick (F6/5)	

* Note: Hours other than 5 x 8's must be by mutual consent as per agreement.