

## Memorandum

Date: August 24, 2004

To: Employers Signatory to California Master Labor Agreement

From: Dick Zampa, Labor Co-Chairman  
Dave McEuen, Management Co-Chairman

Re: Application and Pre-Approval Process for Participation in California Ironworkers  
Collectively Bargained Workers' Compensation Program

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The Trustees of the California Ironworkers Collectively Bargained Workers' Compensation Program are pleased with the interest of employers and insurance carriers to participate in the Program. Since the inception of the Program in February of 2003, the Program has grown to (18) employers and (4) insurance carriers.

If your company is interested in participating in the Program, it is important for you to complete the attached application and questionnaire for *pre-approval*. This application must be submitted (60) days prior to your insurance renewal date for consideration by the Trustees. Each employer must be *pre-approved* prior to participation in the Program. Any employer applications not received (60) days prior to their insurance renewal date will not be approved by the Trustees.

Please advise your insurance broker and insurance carrier of the application and *pre-approval* process for participation in the Program. Please contact Steve Rank, IMPACT Director of Western Region at (916) 784-9144 if you or your insurance broker has any questions.

It is the desire of the Trustees for your company to have the opportunity to participate in the California Ironworkers Collectively Bargained Workers' Compensation Program. If your company is interested in participating in this Program, please submit the attached application for *pre-approval*.

Update:

As of April 15, 2006, the Program has increased to 50 employers and 5 insurance carriers.



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Application and Questionnaire

If your answer is yes to either of two previous questions, please explain.

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Are you signed to the District Council's Drug & Alcohol Policy?       Yes       No  
(If yes, when?) Date: \_\_\_\_\_

Have there been any formal grievances or informal problems in       Yes       No  
the implementation of the Drug & Alcohol Policy? (If yes, explain)

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Have you had any fatalities within the past 2 years? (If yes, explain)       Yes       No

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Have you had any lost time injuries in the last 2 years? (If yes, explain)       Yes       No

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Have you been complying with Section 21 of the Agreement       Yes       No  
by providing Letters of Evidence and submitting prevailing  
wage survey information to the trust office?

I declare under penalty of perjury under the laws of the State of California that my answers to the above questions are true and correct.

Executed on \_\_\_\_\_, 2004 at \_\_\_\_\_, California

Signature \_\_\_\_\_

**Please complete and fax this application to:**

Mr. Gene Vick, Program Administrator, District Council of Iron Workers

Fax number: **(707) 935-8826.**