

JOB ID: _____
(Office Use Only)

IBEW LOCAL UNION NO. 1393 PORTABILITY REQUEST FORM

This form is for members traveling on Portability into the jurisdiction of Local 1393. Only one form may be used for each member. All information requested must be completed or the request will be rejected. A copy of the member's current dues receipt and driver's license or valid State ID card is required to accompany all portability requests.

CONTRACTOR INFORMATION

CONTRACTOR: _____ JOB LOCATION: _____
(i.e., City)

REQUESTED BY: _____ PHONE: _____
(Contractor Representative)

E-MAIL: _____

JOB DESCRIPTION: _____
(i.e., Distribution, Transmission, Underground, Substation, etc.)

CLASSIFICATION REQUESTED: _____

SPECIAL SKILLSET REQUESTED: _____
(If Applicable)

REQUESTED START DATE: _____ RATE OF PAY: _____

MEMBER INFORMATION

MEMBER NAME: _____ CARD NO: _____

ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____

CONTACT PHONE: _____

LOCAL UNION NO: _____ CLASSIFICATION: _____

HOME FUNDS: PENSION: _____

HEALTH & WELFARE: _____
(Provide the names of each fund, not just the Local No.)

- I hereby assign to Local Union 1393, International Brotherhood of Electrical Workers, AFL-CIO, from any wages earned or to be earned by me as a member, a flat rate per month for initiation fees and working dues, or such amounts as may hereafter be established by the Union and become due to it, as my membership dues in said Union. I authorize and direct you to deduct such amounts each month from my pay and to remit the same to the Union.
- I further assign and transfer into Local Union 1393, out of wages to be earned by me as a result of my employment, any such monthly Local Union dues now owing by me for a period not to exceed three (3) months prior to this date.
- This assignment, authorization and directive shall become operative contemporaneously with the effective date of any new collective bargaining agreement between the Employer and the Union, which shall succeed the current collective bargaining agreement between the same parties.
- This assignment, authorization and directive shall be revocable by me at any time, but shall be in full force and effect until revoked by me by giving written notice to both the Employer and the Local Union, such notice to be signed by me and mailed via certified mail to the Employer and the Local Union.
- Fees, dues and assessments covered by this authorization are not deductible as charitable contributions for federal income tax purposes.

Member Signature

Date: _____

Submit completed forms and documents to: jeverson@ibewlocal1393.org

Local 1393 Portability Request Form 03/09/2020