INSTRUCTION SHEET

Application For Certification (*Trade Union Act*, Section 95)

This form can be used to apply to the Board for union certification in the construction industry. (If you are applying for certification in the non-construction industry, use Form 1-PI instead).

By filing this application, the applicant claims that:

- The employees affected by this application are employed in the construction industry (see section 92(c) of the *Trade Union Act* for a definition of the industry);
- The employees affected by this application are engaged in work in a unit that is appropriate for collective bargaining;
- At least 35% of those employees in the unit applied for are members in good standing of the applicant; and
- The employer is engaged in an industry which falls under the jurisdiction of the Province of Nova Scotia.

Important to note:

- Do not modify this form.
- This form must be completed in its entirety and properly signed before the application will be processed. The authority to sign an application is dealt with in Section 5 of the Trade Union Act.
- Applications may be delivered by fax, email, personal service, or by registered mail or other similar mail services.
- If an application is filed on a Saturday, Sunday, or holiday, it will be deemed to be filed on the following business day, as set out in the *Trade Union Act General Regulations*.
- Be as precise as possible when describing the bargaining unit.

Useful resources are available at https://novascotia.ca/lae/labourboard/, including:

- The Nova Scotia Trade Union Act and Regulations
- Labour Board Rules of Procedure
- Past decisions of the Labour Board (CanLII)
- Information Bulletin: Dispute Resolution Alternatives
- Policy Statement Work and the Employer in the Construction Industry

Applications can be submitted to:

Labour Board 1601 Lower Water Street, 3rd Floor PO Box 202 Halifax NS B3J 2M4

Fax: 902-424-1744

Email: labourboard@novascotia.ca

Access

The Board aspires to provide services that are universally accessible. Once your application is submitted, the Board will contact you to provide information about the process. Any accessibility requests that you have can be discussed at that time including language translation and any accommodation that may be required. The Labour Board does not provide legal advice. You may want to contact the Legal Information Society of Nova Scotia for legal assistance.



Privacy Statement

Any personal information requested in this form is collected under the authority of the Nova Scotia *Trade Union Act* ("*TUA*") and the Nova Scotia *Freedom of Information and Protection of Privacy Act* ("*FOIPOP*"). It is collected for the purpose of processing your Application to the Labour Board. The collection, use, and disclosure of this information is managed under the *TUA* and *FOIPOP*. Any information provided to the Board may be shared with all parties affected by this application, subject to the discretion and policies of the Board. The Board's decision in this matter will be posted online to CanLII and Carswell, which are publicly accessible databases.

SECTION A – CONTACT INFORMATION

We need to know how to reach the individuals involved in this application. Fill out as much of this section as possible. It is your responsibility to update the Board if there are any changes in your contact information.

TRADE UNION INFORMATION

If the applicant is a council of trade unions, provide the full name and address of each constituent union of the council.

Full Legal Name of Union:				Local No.:
Contact Person and Position	า:			
Gender Pronouns:		Phone No.:		
Email Address:				
Street Address:				
	T2 .		T	
Town/City:	Province:		Postal Code:	
If applicable, fill out the follo	owing information rela	ated to the Union	's Counsel and Law Fir	'm:
Law Firm Name:				
Counsel Name:				
		т,		
Gender Pronouns:		Phone No.:		



Email Address:			
Street Address:			
Town/City:	Province:		Postal Code:
EMPLOYER INFORMATION			
Full Legal Name of Employer:			
Contact Person and Position:			
Gender Pronouns:		Phone No.:	
Email Address:			
Street Address:			
Town/City:	Province:		Postal Code:
Where the employer is a member of an employers' organization that may be affected by this application, provide the following information:			
Employers' Organization Name:			
Contact Person and Position:			
Gender Pronouns:	Phone No.:		
Email Address:			



SECTION B – EMPLOYER DETAILS

	1.	General nature of the employer's business:
	2.	Employer's hours of operation:
	3.	Describe the nature of the work performed by the employees in the proposed bargaining unit:
	4.	Provide the location(s) where the work referred to is performed (include complete location and description of the site location(s)):
SEC		ON C – PROPOSED BARGAINING UNIT
	1.	Provide a detailed description of the unit of employees the applicant claims is appropriate for collective bargaining:
	2.	Geographic area(s) claimed to be appropriate:
	Ma	ainland Nova Scotia
		pe Breton Nova Scotia



SECTION D – REQUIRED DOCUMENTATION

Ensure you have carefully reviewed this list and attached all documentation requested and check the applicable boxes.

Cons	titution, rules, and by-laws:
\bigcirc	I have attached a copy of the constitution, rules, and by-laws of the applicant union, marked as "Exhibit A", or
\bigcirc	A current copy of these documents is already on file with the Board.
List o	of elected officers:
	have attached a list of the duly elected officers of the applicant union, marked as "Exhibit B" (use the template attached to this form)
List o	of employees in good standing:
	have attached a list of the employees who are members in good standing of the applicant union, marked as "Exhibit C" (use the template attached to this form)
Supp	ort for Exhibit C:
	pport of the list of employees who are members in good standing of the applicant union, I have thed (check all that apply):
	Their membership cards.
F	Receipts or other evidence that dues or fees have been paid.
	Other membership evidence because membership cards are not reasonably available.



Authorization to sign:		
We have authority to sign, being the president and secretary of the trade union or employers' organization;		
We have authority to sign, being two officers of the trade union or employers' organization; I have attached a copy of the resolution, duly passed at a meeting of the union or employers' organization, authorizing me to sign this application, marked as "Exhibit D"; or		
A current copy of an authorization (e.g., a resolu		
IMPORTANT: This application must be completed in fincomplete application form will not be processed. No Board policy, all information collected in this application this matter. Also, note that the decision of the Board databases including Carswell and CanLII.	ote that, except where protected by statute or ion form will be shared with other parties involved	
I/We	declare that the	
(print full name(s) of the a	pplicant(s))	
statements made and information given herein are transcient declaration conscientiously believing it to be the effect as if made under oath, and made by virtue of the	rue, and knowing that it is of the same force and	
DECLARED before me at:)	
, Nova Scotia)	
this,) Applicant's Signature	
20))	
To be declared before a commissioner for taking affidavits or any) Applicant's Signature	
person authorized by law to administer an oath)	



Exhibit "B" to Form 1-PII (Application for Certification – Part II, *Trade Union Act*)

Title	Name	Address
President		
Vice-President		
Recording Secretary		
Financial Secretary		
Treasurer		



CONFIDENTIAL

Name of member in good standing (in alphabetical order)	Date of membership	Most recent date payment has been made in relation to fees or dues

Attach additional pages, if required

