

District Council No. 9, Local Union 1974, IUPAT, AFL-CIO
Drywall Taping Contractors' Association of Greater New York
The Association of Wall-Ceiling & Carpentry Industries of New York, Inc.
Independent Contractors

Job Registration Form

This form must be emailed to jobregistration@dc9.net

NAME OF EMPLOYER _____ EMPLOYER # _____

DATE JOB STARTED _____ SUBCONTRACTED TO/FROM _____

TWO MAN JOB? (YES/NO) _____

Jobs must be reported within 24 hours before commencement. It is particularly important to include floor, room and apartment number. Jobs covering more than one location requires filing for EACH SPECIFIC LOCATION. LATE FILING OR INCOMPLETE INFORMATION ARE VIOLATIONS OF THE AGREEMENT. Separate registrations from subcontractors are required. EVERY EMPLOYER SHALL REPORT TO LOCAL 1974 WITHIN 24 HOURS LOSS OF ANY JOB TO NON-UNION EMPLOYER.

Building Address

Type of Building

Type of Work

Names, Addresses of Agent, Owner, GC, or Mgmt

- ___ *Apartment*
- ___ *Office Building*
- ___ *Industrial*
- ___ *Recreational*
- ___ *Hotel*
- ___ *Hospital*
- ___ *Other (describe)*
- ___ *Taping*

FLOOR _____ ROOM/APT. # _____