

Pierce County Roofers Apprentice Committee (PCR) Training Agent Eligibility Questionnaire

Date of Application:

Name/Title of person filling out the application:

Contact Email:

Contact Phone:

1) Is your company licensed, bonded, registered, and in good standing in the State of Washington? (Please complete the information below):

Contract/Business Name:

Street Address:

Mailing Address:

WA Contractor License #:

WA Workers Comp Acct #:

WA UBI #:

Federal Taxpayer ID:

Years in Business under the same name in WA:

Dept. of LNI Safety Experience Modification Rate (Past 3 Years)

Year/Rate:

Year/Rate:

Year/Rate:

2) The PRC defines a place of business as a physical location that includes an office, warehouse, equipment yard, parking area, and crew room for employees to report to work. Does your company have a place of business within the geographical jurisdiction of the PCR as defined in our Apprenticeship Standards? YES NO

If not, does your company have a place of business within the geographical jurisdiction of, and is your company an active training agent with, an apprenticeship program with which the PCR has a Portability Agreement? YES NO

List Program Name(s):

3) Is your company currently a Washington State Registered Training Agent with any other program? YES NO

If so with what trades and programs?

4) Does, or has your company self-performed roofing or waterproofing work within the State of Washington within the last 3 years? YES NO

If so, please attach a reference list of projects performed over the past 3 years, including project name, customer name and contact, work type, system type, size, and a brief description of the project.

5) What roofing or waterproofing system types and system configurations does your company install or intend to install?

6) Please provide the following:

What roofing or waterproofing system manufacturers is your company currently certified to install and offer manufacturer NDL roofing warranties?

What is your certification for each?

What is the name and contact information for the local area contact for each? (Attached separate list if necessary)?

7) Approximately how many roofing workers does your company generally employ?

8) If your company was to be approved as a training agent, approximately how many of the roofing workers that your company employs would be classified as apprentices?

9) Does your company subcontract any of your roofing or waterproofing work to other contractors? YES NO

If so, what percentage is overall roofing or waterproofing work, and why does your company subcontract this work?

10) The PCR requires new training agents to receive contractor training as required by RCW 39.04.350(1)(f), even if that company is exempt. Has your company designated any officers and/or key management employees to receive this training? YES NO

If so, please list names and training dates and provide certificates of training.

11) If granted an approved training agent status with the PCR, does your company understand and acknowledge that roofing apprentices can only perform the Scope of Work as a Roofer, as defined in WAC 296-127-01370, regardless of what hourly rate they are paid, and can only work in the geographic areas where your company is a registered training agent for a roofing apprenticeship program that the PCR has portability with? YES NO

If no, please explain:

12) If granted an approved training agent status with the PCR, does your company understand that the Union of Open Shop Agreement, as applicable, will apply to the total compensation, working conditions, work rules, and reporting requirements shall serve as minimum requirements to ALL workers performing roofing work for your company? YES NO

If no, please explain:

13) Why does your company wish to become an approved training agent for the Pierce County Roofers Apprenticeship Program?

If the PCR considers and accepts your company's initial eligibility information, is your company willing to provide the following additional reference information? YES NO

- Main Roofing Vendor/Supplier Listing / Contact Information
- Primary Bank Relationship Reference / Contact Information
- Primary Bonding Agent Reference / Contact Information
- Reviewed Financial Statements or Accountants Opinion Letter

If no, please explain:

Please submit your response by email to Racheal@Piercecountyroofers.com, or in writing to 3049 S. 36th St., Suite 213, Tacoma, WA 98409

If you have any questions, you are welcome to contact the PCR office at 253-474-0528.