



## Labor Peace Act PETITION FOR ELECTION

Under the [Labor Peace Act](#) (“LPA”), C.R.S. § 8-3-101 *et seq.*, the Division of Labor Standards and Statistics (“Division”) may conduct elections to determine (1) whether employees desire to form a collective bargaining unit exclusively represented by a labor organization (union) and (2) whether employees will authorize the employer and labor organization to negotiate an all-union agreement (union security clause) requiring union members to pay periodic dues and initiation fees and nonmembers to pay for only representational activities (e.g., collective bargaining, contract administration, and grievance adjustments). The Division may also conduct elections to decertify the collective bargaining unit or revoke an all-union agreement. For guidance, refer to the [Labor Peace and Industrial Relations \(LPIR\) Rules](#) and [INFO #15A](#). If necessary, use and attach additional pages.

<b>Section I: Election Type</b> ( <i>check one</i> ) <input type="checkbox"/> <b>Collective Bargaining Unit</b> <input type="checkbox"/> <b>All-Union Agreement</b> <input type="checkbox"/> <b>Collective Bargaining Unit <u>and</u> All-Union Agreement</b> <input type="checkbox"/> <b>Revocation of an All-Union Agreement</b> <input type="checkbox"/> <b>Decertification of a Collective Bargaining Unit</b>
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<b>Section II: Petitioner</b> ( <i>check one</i> ) <input type="checkbox"/> <b>EMPLOYEE</b> <input type="checkbox"/> <b>LABOR ORGANIZATION</b> <input type="checkbox"/> <b>EMPLOYER</b>		
Full Name ( <i>of individual or organization</i> )		
Authorized Representative Name ( <i>if applicable</i> )		
Mailing Address		
City	State	Zip Code
Telephone Number	Email Address	

<b>Section III: Employer</b> ( <i>if not listed as Petitioner</i> )		
Name of Employer		
Authorized Representative Name ( <i>if applicable</i> )		
Mailing Address		
City	State	Zip Code
Telephone Number	Email Address	

The employer is a <input type="checkbox"/> local state or <input type="checkbox"/> nationwide organization/business, and the address of the principal office is:
Total number of employees employed by this employer throughout the United States:

<b>Section IV: Labor Organization</b> <i>(if applicable and not listed as Petitioner)</i>		
Name of Labor Organization		
Authorized Representative Name <i>(if applicable)</i>		
Mailing Address		
City	State	Zip Code
Telephone Number	Email Address	

**Section V: Description of Current or Proposed Collective Bargaining Unit**

**1. INCLUDED:** *(specify by title or type)*

**2. EXCLUDED:** *(specify by title or type)*

**3. APPROXIMATE NUMBER OF EMPLOYEES IN THE BARGAINING UNIT:**

**4. THE LABOR ORGANIZATION WILL REPRESENT THE FOLLOWING CRAFTS:**

**5. THE ADDRESS OF EACH PLANT OR DIVISION AND THE NUMBER OF EMPLOYEES IN EACH IS:**

(Plant name and address)	(Number eligible)
(Plant name and address)	(Number eligible)
(Plant name and address)	(Number eligible)

**6. ARE ANY OF THE EMPLOYEES IN THE PROPOSED UNIT CURRENTLY REPRESENTED BY A LABOR ORGANIZATION? YES  NO**

*If yes, please provide the following:*

Current Labor Organization: \_\_\_\_\_

Labor Organization Representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Email: \_\_\_\_\_

7. IS THERE AN EXISTING COLLECTIVE BARGAINING AGREEMENT? YES  NO

If yes, please provide the following:

Effective date of agreement: \_\_\_\_\_

Expiration date of agreement: \_\_\_\_\_

Furnish a copy of the Collective Bargaining Agreement or explain below why a copy is not available.

\_\_\_\_\_  
\_\_\_\_\_

**Section VI: NLRB Certification of the Collective Bargaining Unit (if applicable)**

The Collective Bargaining Unit was duly certified by the National Labor Relations Board on \_\_\_\_\_, 20\_\_.

The Bargaining Unit for which the petition for election is filed represents the  employees generally  only certain crafts or departments.

**\*Attach the NLRB Certification or Evidence of Voluntary Recognition.**

**Declaration and Certification**

I declare under penalty of perjury § 18-8-501 *et seq.*, C.R.S. that the contents of this petition for Collective Bargaining Unit Election or All-Union Agreement Election and the statements contained herein are true and correct to the best of my knowledge and belief.

I also certify that this petition is filed by me as a representative of one or more employees, as a representative of the labor organization, or as a representative of the employer in accordance with LPIR Rule 5.2.2.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name of Petitioner

**Applicable Attachments (check)**

- National Labor Relations Board Certification
- Confidential Employee Support for Revocation of an All-Union Agreement ([form below](#))

