Division of Labor Standards and Statistics

707 17th Street, Denver, CO 80202

303-318-8441 | www.ColoradoLaborLaw.gov | www.LeyesLaboralesDeColorado.gov

Labor Peace Act

PETITION FOR ELECTION

Under the <u>Labor Peace Act</u> ("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 <u>Labor Peace and Industrial Relations (LPIR) Rules</u> and <u>INFO #15A</u>. If necessary, use and attach additional pages.

Section I: Election Type (check one)	Collect	tive Bargaining Unit	All-Union Agreement
	☐Collect	ive Bargaining Unit <u>a</u>	nd All-Union Agreement
l	Revoca	ation of an All-Union	A areement
			Agreement
Decertification of a Collective Bargaining Unit			
Section II: Petitioner (check one)	EMPLOY	EE LABOR ORGANI	ZATION EMPLOYER
Full Name (of individual or organization)			
Authorized Penrocentative Name (if appli	nahla)		
Authorized Representative Name (if application)	abie)		
Mailing Address			
City	State		Zip Code
Telephone Number		Email Address	
Section III: Employer (if not listed as Peti	tioner)	-	
Name of Employer			
Authorized Representative Name (if applic	able)		
Mailing Address			
City	State		Zip Code
Telephone Number	•	Email Address	
The employer is a \square local state or \square nationwide organization/business, and the address of the principal office is:			
Total number of employees employed by this employer throughout the United States:			

Colorado Division of Labor Standards and Statistics | 707 17th Street | Denver, Colorado 80202 Main: (303) 318-8441 | Toll Free: 1-888-390-7936 | Fax: (303) 318-8400 | Email: cdle_laborrelations@state.co.us

October 2025 Page 1

Section IV: Labor Organization (if applicable and not listed as Petitioner)				
Name of Labor Organization				
Authorized Representative Name (if application)	ble)			
Mailing Address				
City	State	Zip Code		
Telephone Number		Email Address		
Section V: Description of Current or Prop	osed Co	 	g Unit	
1. INCLUDED: (specify by title or type)				
2. EXCLUDED: (specify by title or type)				
3. APPROXIMATE NUMBER OF EMPLOYI	EES IN T	HE BARGAINING	UNIT:	
4. THE LABOR ORGANIZATION WILL RE	PRESEN	T THE FOLLOWIN	G CRAFTS:	
F. THE ADDRESS OF FACIL BLANT OD	DIV//0101	LAND THE MIME	ED OF EMPLOYEES IN EACH IS	
5. THE ADDRESS OF EACH PLANT OR	DIVISION	N AND THE NUMBI	ER OF EMPLOYEES IN EACH IS:	
(Plant name and address)			(Number eligible)	
(Plant name and address) (Number eligible			(Number eligible)	
(Plant name and address)	(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:				

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October 2025 Page 2

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 \Box employees generally \Box only certain crafts or departments.			
*Attach the NLRB Certification or Evidence of Voluntary Recognition.			
Declaration and Contification			
Declaration and Certification			
I declare under penalty of perjury § 18-8-501 <i>et seq.</i> , 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)			

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October 2025 Page 3

CONFIDENTIAL Employee Support for Revocation of an All-Union Agreement Section 8-3-108(1)(c)(III)(B) of the Labor Peace Act

We, the undersigned employees of	((employer	name), d	demand	that the
Director of the Division of Labor Standards and Statistics cor	nduct an	election	to revoke	the p	reviously
authorized all-union agreement. If necessary, use and attach additional pages.					

Drinted Neme	<u>Signature</u>		
Printed Name	<u> </u>	Address/Phone Number	Position or Job Title

NOTE: FOR USE BY THE CDLE, DIVISION OF LABOR STANDARDS & STATISTICS ONLY - The identity of the employees who signed this attachment to the election petition will not be revealed to the employer, the labor organization, or anyone outside of the Division of Labor Standards and Statistics.