

Port Hawkesbury Mill Application for Subsistence (Article 14.200)

GENERAL: It is agreed between the Company and National Maintenance Council that Union members who are resident in the immediate geographic area will be employed.

When the Union finds it necessary to employ outside members in preference to resident members, no subsistence is applicable except as herein provided.

QUALIFICATION: The following conditions are necessary to qualify for subsistence allowance:

Effective January 1, 2023 One hundred and twenty-five dollars (\$ 125.00) per day worked when working a 5x8 schedule and one hundred and fifty-five dollars (\$ 155.00) per day worked when working a 4x10 schedule.

Effective January 1, 2024 One hundred and thirty dollars (\$ 130.00) per day worked when working a 5x8 schedule and one hundred and sixty dollars (\$ 160.00) per day worked when working a 4x10 schedule.

Effective January 1, 2025 One hundred and thirty-five dollars (\$ 135.00) per day worked when working a 5x8 schedule and one hundred and sixty-five dollars (\$ 165.00) per day worked when working a 4x10 schedule.

- *that there are no local union members in the trade (or having the required trade skills) available within one hundred (100) road kilometers (one way);*
- *that the employee is required to travel at least one hundred (100) road kilometers (one way) from their permanent address;*
- *that the employee provides lodging information to facilitate after hours contact;*
- *that this application is duly completed and approved.*

EMPLOYEE APPLICATION

FIRST NAME

MIDDLE NAME
(Print)

LAST NAME

PERMANENT RESIDENCE:

Street & No

R.R. # & P.O. Box

City/Town

Province, Country

Postal Code

Phone No.

LODGING INFORMATION:

Name of Hotel/Motel/Boarding House

City/Town

Telephone No.

Manager's Name

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PROOF OF PERMANENT RESIDENCE: Original documents (or electronic copies) are required for Proof of Permanent Residence. Two (2) of the following documents are acceptable and will be verified by the Employer, copied and returned.

Check Two (2):

Income Tax Assessment

Medical Card

Property Tax Assessment

Employment Insurance

Drivers Licence

WORK REFERRAL: Employer

Work Location (Plant)

First Day Work (mm/dd/yyyy)

Craft

Skill

I hereby swear the above information to be true and correct and apply for subsistence having met the above qualifications. I understand that the information given is subject to verification and that any subsistence paid based on false information is subject to recovery.

Signature of Applicant: _____ Date: _____

UNION BUSINESS MANAGER: I certify that the Employee's permanent address is true and correct to the best of my knowledge and is as shown in our records, and that this Employee meets the requirements for subsistence in accordance within Article 14.200 and as outlined above.

Union Business Manager/Designee (Print)

Local

Signature of Union Business Manager _____

Date

COMPANY (EMPLOYER): I certify the above information to be true and correct to the best of my knowledge, that the above Employee qualifies for subsistence and that we were required to bring in the Employee as no Local Union Member was available to meet the Owner's requirements. Permanent Residence original documents verified and copies signed.

(Attach Signed Copies) YES

NO

Company Name

Date

Company Representative (Print)

Signature of Representative _____