

**STATE OF NEW YORK
PUBLIC EMPLOYMENT RELATIONS BOARD**

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For use by agricultural employers and their representatives

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DO NOT WRITE IN THIS SPACE

Case No.:

Date Received:

**PETITION BY EMPLOYER FOR INVESTIGATION PURSUANT TO SECTION
705 OF THE NEW YORK STATE EMPLOYMENT RELATIONS ACT**

1. Name of petitioning employer

2. General nature of business

3. Types, classifications or groups of employees which the petitioner claims constitutes the appropriate bargaining unit

4. Number of employees within such unit or units

5. Approximate total number of employees

6. Address at which employees in such unit or units are employed

7. Name and addresses of any known individuals or labor organizations who claim to represent any of the employees in such bargaining unit(s)

8. Any other facts which petitioner considers relevant:

9. The undersigned hereby alleges that a question or controversy has arisen concerning the representation of the employees in the above unit(s), in that one or more individuals or labor organizations have presented to the petitioner a claim to be recognized as the exclusive representative of all employees in the unit claimed to be appropriate.

10. A statement whether the petitioner has contracts with any labor organization or other representatives of employees and, if so, their expiration date(s).

The undersigned requests that the New York State Public Employment Relations Board investigate such question or controversy.

..... declares that they have
(name of person filing the petition)

read the foregoing petition and knows the contents thereof; that the same is true to their knowledge, except as to the matters therein stated to be alleged on information and belief, and as to those matters they believe to be true. The person filing this petition declares the contents to be true under penalty of perjury under the laws of the State of New York.

Name of petitioner. (If a corporation, the name and Official position of the person signing this petition.)

.....

.....

(Signature and Title)

Contact information of individual who will serve as representative of the petitioner and accept service of all papers for purposes of the representation proceeding:

Name: _____

Title: _____

Affiliation: _____

Address: _____

Telephone No. _____

Fax No. _____

Email address: _____