



**UNITED ASSOCIATION**  
of Journeymen and Apprentices of the  
Plumbing and Pipe Fitting Industry of  
the United States and Canada

William P. Hite  
*General President*  
Mark McManus  
*General Secretary-Treasurer*  
Michael A. Pleasant  
*Assistant General President*

**UA Local Union 345**

Landscape/Irrigation, Sewer & Storm, Underground Industrial Piping Industry

## MEMBERSHIP PRE-APPLICATION

**PLEASE TYPE OR PRINT:** Complete the entire application, please answer all questions or your application will be deemed incomplete and may not be considered. You may attach a resume.

**APPLICANT INFORMATION**

Name:	
SSN#:	Email:
Address:	
Date of Birth:	
Phone:	Cell:
Present Employer:	Start Date:
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

**ETHNICITY** (Mark one box only)

<input type="checkbox"/> Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Filipino <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Hispanic
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**EDUCATION** (PLEASE indicate with an "x" which one of the following applies to you)

<input type="checkbox"/> High School <input type="checkbox"/> GED <input type="checkbox"/> College
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**MILITARY SERVICE** (Mark one box only)

<input type="checkbox"/> Yes <input type="checkbox"/> No
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**PERIENCE/SKILLS** PLEASE INDICATE WITH AN "X" WHICH ONE OF THE FOLLOWING APPLIES TO YOU:

PRINCIPLES		
Clean Trenches	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lateral Lines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Main Lines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Solvent Weld.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Solder Weld	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gasket / Ring tight	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gasket / Flange	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pipe Restrains	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Threaded/Mill	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Compression	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Electro Fusion	<input type="checkbox"/> Yes	<input type="checkbox"/> No

PIPE		
P.V.C	<input type="checkbox"/> Yes	<input type="checkbox"/> No
N.D.S	<input type="checkbox"/> Yes	<input type="checkbox"/> No
A.B.S	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Perforated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Corrugated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Poly	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sched. 40/80	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Class 200/315	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cement Lined	<input type="checkbox"/> Yes	<input type="checkbox"/> No

FITTING		
PVC, NDS, ABS	<input type="checkbox"/> Yes	<input type="checkbox"/> No
90°, 45°, 120°, Tees	<input type="checkbox"/> Yes	<input type="checkbox"/> No
SxSxS or TxTxT	<input type="checkbox"/> Yes	<input type="checkbox"/> No

WIRE		
Single Strand	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Multi Strand	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Direct Burial	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fiber Optics	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Communication	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Conduit	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gage	<input type="checkbox"/> Yes	<input type="checkbox"/> No

IRRIGATION SYSTEMS		
Overhead Spray	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Impacts	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Rotors	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bubblers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drips	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Microjet	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Triangulated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Square	<input type="checkbox"/> Yes	<input type="checkbox"/> No

DETAILS		
Legend	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Specs	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Codes	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Scale	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Take Offs	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Plot Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Submittals	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**HOW WERE YOU INFORMED ABOUT UA LOCAL UNION 345** (Mark one box only)

- Company
- Century Community Training
- EDD
- Helmets to Hardhats
- Homeboy Industries
- Other \_\_\_\_\_
- PV Jobs
- Union Member (Members Name) \_\_\_\_\_
- We Build

**UA Local Union 345** is an Equal Opportunity Labor Union committed to excellence through diversity. Offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.  
 (California Labor Code, CH4, Division 3, Section 151) Any misstatements or omissions of material facts in this application may cause for dismissal. I certify the above information is correct to the best of my knowledge. I, the undersigned, do hereby designate and authorized United Association Local Union 345 AFL-CIO, to act as my collective bargaining representative with my present and future employers.

Signature \_\_\_\_\_

Date \_\_\_\_\_