



REPRESENTATION PETITION

Is this an amended petition? Yes No If yes, enter the case number: _____

PARTIES Include information for all parties involved.

EMPLOYER Seattle Public Utilities

Contact Jeff Clark

Title Director of Labor Relations

Address 700 5th Ave, Suite 5400

City, State, ZIP Seattle, WA 98104

Telephone 206-684-7999 Ext. _____

Email SHR_LaborRelations@seattle.gov

PETITIONER WSCCCE, Council 2, AFSCME

Contact Bill Keenan

Title Director of Organizing

Address P.O. Box 750

City, State, ZIP Everett, WA 98206-0750

Telephone 525-864-6619 Ext. _____

Email bilk@council2.com

CURRENT BARGAINING REPRESENTATIVE

If one exists _____

Contact _____

Title _____

Address _____

City, State, ZIP _____

Telephone _____ Ext. _____

Email _____

TYPE OF REQUEST Select ONE of the following.

- RECOGNITION** to be certified as the representative of employees currently unrepresented.
- INCLUSION OF UNREPRESENTED EMPLOYEES** to have a group of employees added to an existing bargaining unit as described in WAC 391-25-440.
- CHANGE OF REPRESENTATIVE** to be certified as the representative of employees currently represented by another organization.
- DECERTIFICATION** to no longer be represented by the current organization.
- EMPLOYER PETITION** a determination by the commission according to WAC 391-25-090.

BARGAINING UNIT

Department or Division Seattle Public Utilities

Number of Employees in Bargaining Unit 170

Describe the existing or proposed bargaining unit:

All Seattle Public Utilities Strategic Advisors I, II and III's, and Manager I, II and III's excluding all other employees.

Collective Bargaining Agreement (CBA):

If one exists, the bargaining unit's most recent collective bargaining agreement must be filed with this petition.

CBA Expiration Date _____

SHOWING OF INTEREST The showing of interest cards are confidential and are filed ONLY with PERC.

The petition must be filed with a showing of interest indicating support of at least 30 percent of the employees in the bargaining unit. Showing of interest cards may be submitted electronically, provided the copy is legible.

AUTHORIZED CONTACT FOR PETITIONER

Name Bill Keenan Title Director of Organizing

Address P.O. Box 750 City, State, ZIP Everett, WA, 99206-0750

Telephone 425-864-6619 Ext. _____ Email bilk@council2.com

Signature Date 5/21/21

From: [Copier](#)
To: [Bill Keenan](#)
Subject: Message from "RNP5838794A5B99"
Date: Friday, May 21, 2021 1:13:31 PM
Attachments: 20210521131630512.pdf

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Subject: Message from "RNP5838794A5B99"
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From: [Bill Keenan](#)
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Cc: [Bill Keenan](#)
Subject: Representation Petition for employees of Seattle Public Utilities
Date: Friday, May 21, 2021 1:22:12 PM
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