



# REPRESENTATION PETITION

Is this an amended petition? ☐ Yes ☒ No If yes, provide the case number: \_\_\_\_\_

## PARTIES Include information for all parties involved.

**EMPLOYER** See attachment  
**Contact** Chris Elwell  
**Title** Acting Exec. Director-Labor Relations  
**Address** 401 S. Jackson St.  
**City, State, ZIP** Seattle, WA 98104  
**Phone** (206) 355-9166 **Ext.** \_\_\_\_\_  
**Email** chris.elwell@soundtransit.org

**PETITIONER** See attachment  
**Contact** John Hoheusle  
**Title** President/Business Agent  
**Address** 6923 Lakewood Drive W B-1  
**City, State, ZIP** Tacoma, WA 98467  
**Phone** (253) 474-3123 **Ext.** \_\_\_\_\_  
**Email** 758president@atu758.org

## CURRENT BARGAINING REPRESENTATIVE

**(If One Exists)** None  
**Contact** \_\_\_\_\_  
**Title** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City, State, Zip** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Ext.** \_\_\_\_\_  
**Email** \_\_\_\_\_

## TYPE OF REQUEST Select ONE of the following.

- ☐ **NEW ORGANIZING** to be certified as the representative of employees currently unrepresented.
- ☒ **ADD UNREPRESENTED EMPLOYEES** to an existing bargaining unit as described in WAC 391-25-080.
- ☐ **CHANGE REPRESENTATIVE** of existing bargaining unit.
- ☐ **REMOVE REPRESENTATIVE** of existing bargaining unit.

## BARGAINING UNIT

For a new organizing petition, fill out section 2. For a petition to add unrepresented employees, fill out **both** sections 1 and 2. For a petition to change or remove the representative, fill out section 1.

### SECTION 1—Describe the Existing Bargaining Unit:

Light rail vehicle operators, as set out at Article 3 of the parties' CBA.

**Number of Employees in Existing Unit** 27

### SECTION 2—Describe the Proposed Bargaining Unit:

See attachment.

**Number of Employees in Proposed Unit** 44

**If a CBA exists, what is the expiration date?** 09/30/2026

## SHOWING OF INTEREST

A showing of interest indicating the support of at least 30 percent of the employees in the bargaining unit must be filed with the petition. **See instructions for more information.**

## PETITIONER REPRESENTATIVE

**Name** Christopher Bangs  
**Address** 10000 New Hampshire Ave  
**Phone** 2022622630 **Ext.** \_\_\_\_\_  
**Signature** /s/Christopher Bangs

**Title** Associate General Counsel, ATU  
**City, State, ZIP** Silver Spring, MD 20903  
**Email** cbangs@atu.org  
**Date** 02/05/24

## **Attachment**

### Parties

Employer: Central Puget Sound Regional Transit Authority

Petitioner: Amalgamated Transit Union, Local 758

### Bargaining Unit

#### Section 2 – Describe the Proposed Bargaining Unit

ATU seeks a self-determination election / card check to add the following group to ATU's existing bargaining unit: "All maintenance department employees, including light rail systems maintenance technicians, rail service specialists, and maintenance supervisors."

**BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION  
STATE OF WASHINGTON**

Amalgamated Transit Union, Local 758

Petitioner/Complainant/Filing Party

v.

Central Puget Sound Regional  
Transit Authority (Sound Transit)

Respondent/Responding Party

Case Number

**CERTIFICATE OF SERVICE**

I certify that I served a copy of this *(title of document)* Representation Petition and Attachments  
on all parties or their counsel of record on *(date)* 02/05/24

To:	Name Chris Elwell		
	Organization Sound Transit	<input checked="" type="checkbox"/> E-mail	<input checked="" type="checkbox"/> First Class U.S. Mail
	Address 401 S. Jackson St.	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP Seattle WA 98104	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email chris.elwell@soundtransit.org		
	Fax		
To:	Name		
	Organization	<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email		
	Fax		
To:	Name		
	Organization	<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email		
	Fax		

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Date signed and submitted 02/05/24

Print Name Christopher Bangs

Signature /s/Christopher Bangs



**From:** [Christopher Bangs](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Subject:** Representation Petition Filing - Sound Transit and ATU Local 758  
**Date:** Monday, February 5, 2024 4:12:49 PM  
**Attachments:** Sound Transit ATU 758 Representation Petition.pdf  
Certificate-of-Service.pdf  
Sound Transit ATU 758 CBA.pdf  
Notice of Appearance as Representative of Amalgamated Transit Union Local 758.pdf  
Showing of Interest.pdf

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External Email

Hello,

Attached please find a new representation petition and related attachments, including the showing of interest and certificate of service.

Best,

Christopher Bangs  
Associate General Counsel  
Amalgamated Transit Union  
10000 New Hampshire Avenue  
Silver Spring, MD 20903  
Cell: (202) 262-2630  
Fax: (301) 431-7116