



NYS DOL Use Only: Sponsor No. <u>78100</u> <input checked="" type="checkbox"/> New Program <input type="checkbox"/> Reactivation <input type="checkbox"/> Revision <input type="checkbox"/> Recertification
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New York State  
Registered Apprenticeship Training Program  
**Sponsor Information Sheet and Instructions**

Form AT 9 is used to collect data regarding sponsors and signatories for the New York State (NYS) Registered Apprenticeship Training Program. Please read the instructions on pages 3 and 4 before completing this form.

**Section I**

- A. Sponsor name: DiMarco Constructors LLC
- B. Trade(s): Skilled Construction Craft Laborer, Carpenter
- C. Type of Apprenticeship Training Program (check one):  
 1.  Individual Non-Joint  
 2.  Individual Joint  
 3.  Group Non-Joint\*  
 4.  Group Joint (JAC/JATC)\*  
**\*For sponsors of group programs only (3 and 4) – See instructions for signatory list submission information.**
- D. Name of entity completing this form: DiMarco Constructors LLC
- E. Entity completing this form (check one):  
 Individual Employer/Sponsor  
 Union  
 JAC/JATC  
 Association  
 Employer/Signatory company serving on the JAC/JATC, Board of Directors, or other governing body
- F. Mailing address: Street: 1950 Brighton Henrietta Town Line Road  
 City/Town: Rochester State: NY Zip Code: 14623
- G. Email: [REDACTED] H. Phone: (585) 272-7760 I. Fax: (585) 272-0720
- J. Federal Employer Identification Number (FEIN): [REDACTED]
- K. NYS Unemployment Insurance Employer Registration (ER) Number: [REDACTED]
- L. Is this entity required to report any employee wages under this FEIN to the NYS Department of Tax and Finance?.....  Yes    No
- M. Type of Entity (check one and provide attachments as noted in the instructions):  
 Corporation  
 Partnership  
 Sole-Proprietor  
 LLC  
 LLP  
 Other
- N. How many years has your organization been in business? \_\_\_\_\_
- O. Within the past five (5) years, have you done business under a different name?.....  Yes    No  
 If 'Yes', provide attachments as noted in the instructions.
- P. If this is part of a new program application or if your entity is new to an existing program, within the past five (5) years, has your organization, any substantially owned-affiliated entity,\*\* any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any officer, any partner, or any proprietor been a sponsor of, or signatory to, a NYS Registered Apprenticeship Program? .....  Yes    No  
 If 'Yes', provide attachments as noted in the instructions.

NYS Department of Labor  
Apprentice Training

**Section II**

Complete all questions, (1 – 10), in this section and provide attachments as noted in the instructions. MAY 23 2022

Within the past five (5) years, has your organization, any substantially owned-affiliated entity,\*\* any predecessor company or entity, any owner of 10% or more of the entity's shares, any director, any Central Office officer, any partner, or any proprietor been the subject of:

- 1. Any conviction for a crime under state or federal law?.....  Yes    No
- 2. Any indictment or pending indictment for conduct constituting a crime under state or federal law?...  Yes    No
- 3. Any grant of immunity for conduct constituting a crime under state or federal law?.....  Yes    No

\*\* For the definitions of a 'substantially owned-affiliated entity' see the end of Section I in the instructions.

4. Any suspension, bid rejection, or disapproval by any governmental entity of any proposed contract or subcontract for lack of responsibility, or denial or revocation of pre-qualification for any bid in any state or municipality, or a voluntary exclusion agreement?.....  Yes  No
5. Any federal, state, or municipal debarments, including Workers' Compensation or Public Work?.....  Yes  No
6. Any pending or open investigation of a possible violation, or determination of a violation of any federal law or regulation including, but not limited to, investigations by the National Labor Relations Board (NLRB) or the United States Department of Labor (USDOL) Wage and Hour Division?.....  Yes  No
7. a. Any pending or open Occupational Safety and Health Administration (OSHA) investigation?.....  Yes  No  
 b. Any OSHA citation that resulted in a final determination classified as serious, willful, or repeat?  Yes  No
8. a. Any pending or open investigation of a possible violation, or determination of a violation of New York State law or regulation, any other state law or regulation, or any municipal law or regulation including, but not limited to, investigations by the Bureau of Public Work, the Division of Safety and Health, or the Division of Labor Standards?.....  Yes  No  
 b. If 'Yes', was the violation determined to be willful?.....  Yes  No
9. Any investigations, claims, or lawsuits before the US Equal Employment Opportunity Commission (EEOC), USDOL Office of Federal Contract Compliance Program (OFCCP), NYS Division of Human Rights, federal or state courts, or local Civil Rights Commissions?.....  Yes  No
10. Any stipulations, settlement, consent order, or like agreement involving any state, municipal, or federal enforcement action (judicial or regulatory) **other than those covered above**?.....  Yes  No

**After completing Sections I and II, you must sign Section III, and have it notarized.**

**Section III**

**Certification** – I, the undersigned, recognize that I submit this questionnaire to permit the New York State Department of Labor to review the background of the applicant, sponsor, union, or signatory employers and association(s) serving as a member of the JAC/JATC or other governing body at the time of new program application, during program probation, at recertification, or as otherwise deemed appropriate by the Department.

I certify:

- That the Department may use its sole discretion to choose the means to determine the truth and accuracy of all statements made herein.
- That intentional submission of false or misleading information may constitute a Class A misdemeanor under Penal Law (PL § 210.35), and may be punishable by a fine of up to \$1,000 (PL § 80.05(1)) and/or imprisonment of up to one year (PL § 70.15(1)).
- That the information submitted in this questionnaire and any attachments is true, accurate, and complete.

The undersigned recognizes that any adverse information uncovered regarding any applicant, sponsor, signatory, or union participating in a Joint Apprenticeship Committee, or other sponsoring association, may adversely affect the sponsor's application request or program. Signing this document constitutes permission to release this information (including UI information) concerning the entity completing this form to the program sponsor.

Signature of CEO, Chair, or representative granted legal authority to bind the Entity \_\_\_\_\_ Date 4-22-2022

Print name and title: Kenneth J. Buck, VP

Sworn to me this: 22<sup>nd</sup> day of April 2022 \_\_\_\_\_  
 Signature of Notary Public or Commissioner of Deeds



**TANIA GERHART**  
 Notary Public, State of New York  
 No. 01GE6239174  
 Qualified in Monroe County  
 Commission Expires April 18, 2023  
 NYS Department of Labor  
 Apprentice Training

MAY 23 2022

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**Apprentice Training Program Registration Agreement**

Revision

Nature of Change: New Program Application

State Use Only	
AT Sponsor No.	<u>78100</u>
ATP Code	<u>12-037</u>
Effective Date of AT Program	

- Name of Sponsor: DiMarco Constructors LLC
- Mailing Address: 1950 Brighton Henrietta Town Line Road Rochester NY 14623 Monroe  
(number & street) (city) (state) (zip code) (county)
- Actual Address: Same as above  
(number & street) (city) (state) (zip code) (county)
- Telephone No.: 585-272-7760 Ext. \_\_\_\_\_ Fax No.: 585-272-0720
- E-mail Address: \_\_\_\_\_
- Trade/Occupation: Carpenter
- No. Employees: 60 No. Apprentices: 2 No. Journeyworkers: 20 8. Ratio: 1:1:1:4
- DOT Code: 860.381.022 10. Length of Program: 48 months
- Apprentice Probationary Period: 12 months 12. Work process: Standard  or Revised
- Minimum Journeyworker Rate: \$ 18.19<sup>00</sup> per hour 14. Effective Date of Wages: 1/14/21
- Apprentice wage progression for each period – in months (M) or hours (H)

1	2	3	4	5	6	7	8	9	10
M <input checked="" type="checkbox"/>	M <input checked="" type="checkbox"/>	M <input checked="" type="checkbox"/>	M <input checked="" type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>	M <input type="checkbox"/>
H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>	H <input type="checkbox"/>
12	12	12	12						
\$ <u>15</u>	\$ <u>16</u>	\$ <u>17</u>	\$ <u>18</u>						

16. The sponsor agrees to comply with the provisions on this side and on the reverse of this agreement.

17. Ryan Byers 5/9/22 18. \_\_\_\_\_  
Signature of Official Sponsor Representative Date Signature of Union Representative Date  
Ryan Byers - Facilities Manager  
Print Name and Title Print Name, Title, and Union Name

19. \_\_\_\_\_  
Signature New York State Department of Labor Date

NYS Department of Labor  
Apprentice Training

AT 10 (11/20)

MAY 23 2022

Central Office



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Department of Labor

Apprenticeship Training Program

Sponsor Code 78100

Trade Code 12-037

Related Instruction Availability

Received Apprenticeship Unit

MAY 9 2022

Trade: Carpenter

Sponsor Name: DiMarco Constructors, LLC

Sponsor Representative: Mitchell Buck - Compliance Specialist

ROCHESTER

Sponsor Address:

No. & Street: 1950 Brighton-Henrietta Townline Road City: Rochester

County: Monroe State: NY Zip Code: 14623

Sponsor Telephone No.: (585) 662-1481

Proposed Number of Apprentices: 2

AT Office

Name: NYSDOL - Apprenticeship Training Unit

No. & Street: 276 Waring Road

City: Rochester State: NY Zip Code: 14609

Apprentice Training Representative: [Redacted] Date Prepared: 4/22/22

Related instruction is not available.  Related instruction is available at:

School

Name: Penn Foster (Online)

No. & Street: http://www.workforcedevelopment.com/apprenticeship.html

City: State: Zip Code:

School Representative Contact Information:

Name: Harold Ayers

Telephone No.: 800-672-9377

Email: [Redacted]

School

Name: CTCNYS-Rochester (ABC (Associated Builders and Contractors))

No. & Street: 2672 W Ridge Road

City: Greece State: NY Zip Code: 14626

School Representative Contact Information:

Name: Jamie Campisi - Craft Training Manager

Telephone No.: (585) 455-0293

Email:

DLEA

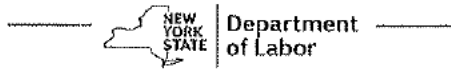
Name: [Redacted]

No. & Street: 30 Hart Street

City: Rochester State: NY Zip Code: 14605

Signature of DLEA [Redacted]

Date Prepared: 4/27/22  
Department of Labor  
Apprenticeship Training



www.labor.ny.gov

Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: DiMarco Constructors LLC

Located at: (Address) 1950 Brighton Henrietta Town Line Road, Rochester, New York 14623

Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings: 1

In the occupation of: (List Trade) Carpenter

If you are interested in taking advantage of this training opportunity and meet the following qualifications, you are eligible to apply.

Minimum Qualifications

Minimum Age: 18 Minimum Education: HSD, or High School Equivalency Diploma (TASC or GED).

Physical Condition: Be physically able to perform the work required as determined by:

Must attest, in writing, to physical capabilities needed to perform the work of a Carpenter. Must take and pass a mandatory drug test, at the expense of the Sponsor, prior to enrollment.

(Note: Costs for medical examination, if required, are at the expense of the sponsor. Additionally, any testing fees and permitted application fees charged to an applicant may not result in a profit for the sponsor.)

Other: Must be capable of lifting up to 50 pounds unassisted. Must be willing and able to work outdoors and in all types of weather. Must be able to climb ladders and scaffolding, and work from heights greater than 20 ft.

Other: Must have manual dexterity with the ability to quickly move your hands, your hands together with your arms, to grasp, manipulate, or assemble objects.

Other: Must have reliable transportation to and from work and related classroom instruction at the approved school.

NYS Department of Labor
Apprentice Training

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Application forms may be obtained: From: To:

Name: Mitchell Buck - Compliance Specialist Central Office

Address: 1950 Brighton-Henrietta Town Line Road, Rochester, New York 14623

Days: Monday - Friday Times: 9:00AM - 5:00PM

Phone: (585) 272-7760 Email: [Redacted]

Special Instructions:

All Applications Must be (please check) [ ] Received [ ] Postmarked No Later Than:



**Selection Standards and Evaluations**

Name of Candidate: \_\_\_\_\_ Trade: Carpenter

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Only those checked apply.

**Educational Achievement**

- 2 Points for Each Year of Education Past Grade 12 or Equivalent as Recognized by Local Educational Authorities
- 4 Points for Each Year of Related Technical Education Past Grade 9 or Equivalent as Recognized by Local Educational Authorities
- 4 Points for Each Trade Related Adult or Continuing Education Course Completed
- Other: \_\_\_\_\_

	Maximum Points Allowable	Number of Years Credited	Score
<b>Total</b>	30		<b>Total</b>
	6		
	12		
	16		

**Work Experience**

- 3 Points for Each Year of Trade Related Work Experience
- 2 Points for Each Year of Active Military Experience
- 1 Points for Each Year of General Work Experience
- Other: \_\_\_\_\_

<b>Total</b>	30		<b>Total</b>
	15		
	10		
	5		

**Seniority**

- 5 Points for Each Year of Employment with The Sponsoring Firm
- Other: \_\_\_\_\_

<b>Total</b>	20		<b>Total</b>
	20		

**Job Aptitude**

- Name of Aptitude Test: \_\_\_\_\_
- Administered by \_\_\_\_\_
- Other: \_\_\_\_\_

<b>Total</b>			<b>Total</b>

**Oral Interview: Not to Exceed 40% of Total Score**

- 1-5 Ability to Communicate
- 1-5 Willingness to Accept Obligation of Apprenticeship
- 1-5 Ability to Reason and Comprehend
- 1-5 Interest and Motivation
- Other: \_\_\_\_\_
- Other: NYS Department of Labor

<b>Total</b>	20		<b>Total</b>
	5		
	5		
	5		
	5		

Apprentice Training

MAY 23 2022

Total Allowable Points



100	Total Score →	
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Central Office

Rank \_\_\_\_\_

Evaluated by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Name)

Sponsor Name: DiMarco Constructors LLC

Sponsor Address: 1950 Brighton Henrietta Town Line Rd, Rochester, NY 14623

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Department of Labor

www.labor.ny.gov

Received Apprenticeship Unit

APR 21 2022

ROCHESTER

Non-Discrimination Plan (Short Form)

A. Equal Opportunity Pledge: Our company recognizes that all persons shall have equal opportunity in employment and apprenticeship training, and agrees to adhere to the following:

The recruitment, selection, employment, and training of apprentices during the apprenticeship shall be without discrimination because of race, creed, color, religion, national origin, age, sex, disability, veteran status, marital status, or arrest record. The sponsor will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under Title 29 of the Code of Federal Regulations, Part 30; Title 12 of the Official Compilation of Codes, Rules and Regulations of the State of New York, Part 600; and the Americans with Disabilities Act of 1990.

B. Sexual Harassment Prevention Policy: Our policy is that sexual harassment is prohibited. This policy applies to internal activity towards employees, interaction between employees and actions and treatment directed towards employees, from any person or persons at the worksite whether or not they are employees of this organization.

Equal Employment Opportunity Commission (EEOC) guidelines provide that verbal or physical conduct of a sexual nature may constitute sexual harassment when:

- Submission to such contact is made either explicitly or implicitly a term or condition of an individual's employment;
• Submission to, or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; and/or
• Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

When an employee has a complaint of sexual harassment, the complaint should be brought promptly to the attention of his/her immediate supervisor, or to the next level of supervision. These persons have the authority and responsibility to resolve the complaint. If the complaint is not satisfactorily resolved, the employee has the right to contact the NYS Division of Human Rights and the Federal Equal Employment Opportunity Commission. The complaint will be investigated; if substantiated, prompt action will be taken to stop the harassment immediately and prevent recurrence.

If an employee is an apprentice, the program's apprenticeship administrator and the NYS Apprenticeship Director must be notified of the complaint.

C. Minimum Qualifications and Selection Standards: It is agreed that the minimum qualifications and selection standards utilized will be those listed on form AT 505, Apprentice Training Recruitment Notification and Minimum Qualifications, and form AT 508, Selection Standards and Evaluations, on file with the Department.

D. Recruitment: It is agreed that the sponsor will recruit applicants for apprenticeship by (Check One):

- [ ] Listing all apprentice openings with the NYS Job Bank (www.newyork.us.jobs/) for a minimum of five full working days before selections are made.
[X] Limiting recruitment to present employees of the sponsor and/or union members of the union sponsoring the apprenticeship program. Resulting vacancies will be listed with the NYS Job Bank (www.newyork.us.jobs/).
[ ] Recruiting apprentices by methods other than those above. A detailed statement of the recruitment method must be attached and approved by the Commissioner of Labor prior to being used.

On behalf of the sponsor, I certify that it is our intent to fulfill these Equal Opportunity Standards.

Signature of Sponsor:

[Handwritten signature]

The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative.

4-21-2022

Date

Kenneth J. Buck Vice President

Print Name and Title

Approved by:

New York State Department of Labor

Date

Sponsor Name DiMarco Constructors LLC

Sponsor Code 78100

No. of Apprentices 2

Trade(s) Skilled Construction Craft Laborer, Carpenter

Trade Code(s) 18-514; 12-037

NYS Department of Labor Apprentice Training

AT 602 (11/20)

MAY 23 2022

Central Office