

NYSDOL Use Only:	Sponsor N	o. <u>78101</u>		
☑ New Program □	Reactivation	☐ Revision	☐ Recertification	

New York State Registered Apprenticeship Training Program

NYS Department of Labor Apprentice Training

AUG 09 2024

Sponsor Information Sheet and Instructions

Central Office
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.

Sect	ion I	
Α.	Sponsor name: Power & Construction Group, Inc.	
	Trade(s): Electrical (Outside) Line Worker, Skilled Construction Craft Laborer, Electrician	
C.	Type of Apprenticeship Training Program (check one):	
=-	1. Individual Non-Joint 2. Individual Joint 3. Group Non-Joint 4. Group Joint (JAC/JATC)	*
	or sponsors of group programs only (3 and 4) – See instructions for signatory list submission information. Name of entity completing this form: Power & Construction Group, Inc.	
	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: P.O. Box 30	
_	City/Town: Scottsville State: NY Zip Code: 14546 Email: H. Phone: (585) 889-8500 I. Fax: (585) 889-1219	
G.		
J.	Federal Employer Identification Number (FEIN):	
K.	NYS Unemployment Insurance Employer Registration (ER) Number:	
L.	Is this entity required to report any employee wages under this FEIN to the NYS Department	
	of Tax and Finance?	☐ No
M.	Type of Entity (check one and provide attachments as noted in the instructions):	
	☑ Corporation ☐ Partnership ☐ Sole-Proprietor ☐ LLC ☐ LLP ☐ Other	
	How many years has your organization been in business? 19	
Ο.	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.	
Р.	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?	✓ No
	If 'Yes', provide attachments as noted in the instructions.	
Sect		
	lete all questions, (1 – 10), in this section and provide attachments as noted in the instructions.	
	ithe past five (5) years, has your organization, any substantially owned-affiliated entity,** any cessor company or entity, any owner of 10% or more of the entity's shares, any director, any	
officer	, any partner, or any proprietor been the subject of:	
1.	Any conviction for a crime under state or federal law?	⊠ No
2.	Any indictment or pending indictment for conduct constituting a crime under state or federal law?	⊠ No
3.	Any grant of immunity for conduct constituting a crime under state or federal law?	∑ No

AT 9 (09/21)

^{**} 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 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?	☑ No
7.	a. Any pending or open Occupational Safety and Health Administration (OSHA) investigation? Yes	⊠ No
8.	 Any OSHA citation that resulted in a final determination classified as serious, willful, or repeat? Yes 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 	⊠ No
	Division of Safety and Health, or the Division of Labor Standards?	⊠ No
	b. If 'Yes', was the violation determined to be willful?	No 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?	☐ 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?	⋈ No
	After completing Sections I and II, you must sign Section III, and have it notarized.	
Secti	ion III	
Depar servin	fication – I, the undersigned, recognize that I submit this questionnaire to permit the New York State rtment of Labor to review the background of the applicant, sponsor, union, or signatory employers and associang as a member of the JAC/JATC or other governing body at the time of new program application, during progetion, at recertification, or as otherwise deemed appropriate by the Department.	ation(s) ram
I cert	tify:	
	 That the Department may use its sole discretion to choose the means to determine the truth and accurate of all statements made herein. 	асу
	• 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)).	or
	 That the information submitted in this questionnaire and any attachments is true, accurate, and comple 	te.
oartici; applica	ndersigned recognizes that any adverse information uncovered regarding any applicant, sponsor, signatory, of ipating in a Joint Apprenticeship Committee, or other sponsoring association, may adversely affect the sponsoriation request or program. Signing this document constitutes permission to release this information (including nation) concerning the entity completing this form to the program sponsor.	or's
Signat	ture of CEO, Chair, or representative granted legal authority to bind the Entity Date	
Print n	name and title: Scott R. Ingalls, President	
	to me this: 9TH day of MAY 202H Muchelle Stouroally Signature of Notary Public or Commissioner of Deed	skum 1
 	NYSDOL Official Use Only	S
A	Received MICHELLE L. SPAULDING Notary Public - State of New York No. 01SP6044615	
	MAY 1 0 2024 Qualified in Ontario County My Commission Expires July 10, 202	
j 	Fight Requist Date Stamp	



NYS Department of Labor Apprentice Training

AUG 09 2024

Central Office

Apprentice Training Program Registration Agreement

Revision								e Use Only				
Nature of Change:	•	New Program Application EITHER P. WIERZBA ON E. SLUSAR					AT Sp	AT Sponsor No. 78101				
				OBRAM CA			ATP C	ode 18-5	14			
							Effectiv	ve Date				
							of AT I	Program				
1. Name of Spons	sor: Power	r & Construc	tion Group,	Inc.								
2. Mailing Addres			Sco	ottsville		NY	14546		Monroe			
	•	er & street)	Soo	(city)	NIN.	(state)		o code)	(county)			
Actual Address		er & street)	300	(city)	NY	(state)	<u>14546</u> (zi	code)	/lonroe (county)			
4. Telephone No.:	(585) 889	9-8500				Fax No.: <u>(5</u>	85) 889-12	19				
5. E-mail Address	:											
6. Trade/Occupat	ion: Skilled	d Construction	on Craft Lat	oorer	,							
7. No. Employees	_				lourneywor	kore: 5	<i>O</i> 8 1	Patio: 1:1:	1:3			
0.					-							
												
11. Apprentice Pro												
13. Minimum Journ	eyworker i	Rate: \$_~	per per	hour	14. Eff	ective Date	of Wages:	<u>S/</u>	9/2024			
15. Apprentice wag	je progress	sion for each	n period – in	months (M)	or hours (H	H)						
	1	2	3	4	5	6	7	8	9	10		
Months (check):	мД	M <u>X</u>	M X	M ⊠	М	М	М	M 🔲	М 🗆	М		
Hours (check):	н 🔲	н	н	н	н 🗀	н	н	н 🗆	н	н		
No. of Months/Hours:	6	6	6	6								
age rate: <i>or</i> , percentage the journeyworker rate:	<i>5 18.</i> [∞]	\$ 19.00	# 20.00	-						 		
ľ	4 70-	# 77.	3 40.	4 01.								
16. The sponsor ag	arees to co	mnly with th	e nrovisions	s on this side	and on the	reverse of	this agreer	nent				
Δ .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, o providio i	o on ano orde	and on the		1 1					
17. <u>fitus</u> Signature of Of	<u> </u>	ifa.	ntativa	5/9/2-02 Date	•	duren)	She			9/2024		
Signature of Or	()	•		•		•	Jnion Repre		Da	ate		
TEREN. D.	Print Name	1 50141	KEC. V	• 1.		Ward Print Na	me, Title, a		<i>ANN GCR</i> Name			
							,					

Wage



Sponsor Code 78010

Trade Code 18-514

Related Instruction Availability

Trade: Skilled Construction Craft Laborer			
Sponsor Name: Power & Construction Group, Inc.			
Sponsor Representative: Peter D. Wierzba			
Sponsor Address:			
No. & Street: 96 Wester River Road	City	Scottsville	
County: Monroe	State: NY	Zip Code: 1454	16
Sponsor Telephone No.: 585-889-8500			
Proposed Number of Apprentices: 0			
AT Office			
Name: NYSDOL Apprenticeship Training Unit			
No. & Street: 276 Waring Road			
City: Rochester	State: <u>NY</u>	Zip Code: 146	609
Apprentice Training Representative: Robert Coe		Date Prepared	
Related instruction is not available. School Name: Penn Foster (Online) (www.workforcedevelop	ment.com)	on is available at:	
No. & Street: http://www.workforcedevel.opment.com	n/apprenticeship.html		
City: Scranton	State: <u>PA</u>	Zip Code: <u>185</u>	15
School Representative Contact Information: Name: Harold Ayers			
Telephone No.: 1 (888) 427-6200	Email:		
School Name: NCCER Connect (online) * Pending DLEA Ap No. & Street: https://www.pearson.com/en-us/search	proval html/Careers+%26+	Trades	
City:	State:	Zip Code:	NYS Department of Labor
School Representative Contact Information:			
Name:			AUG 0 9 2024
Telephone No.:			Central Office
DLEA			
Name: Monroe 2 BOCES, Center for Workforce Deve		areau-Kurtz/Jill Slavny	
No. & Street: WEMOCO CTE Center, 3589 Big Ridge	e Road		····
City: Spencerport	State: NY	Zip Code: 14	559
Signature of DLEA _		Date Prepared: 8/5/2	



Sponsor Code: 78101

Trade Code: 18-514

www.labor.ny.gov

Apprentice Training Recruitment Notification and Minimum Qualifications

Sponsor: Power & Construction Group, Inc.
Located at: (Address) 96 W. River Road, Scottsville, NY 14546
Is presently accepting applications for Apprenticeship Training Positions: List estimated number of openings: Skilled Construction Craft Laborer Skilled Construction Craft Laborer
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: High School (HS) Diploma or HS Equivalency Diploma (such as TASC or GED).
Physical Condition: Be physically able to perform the work required as determined by:
Post offer and prior to enrollment, must pass a DOT physical and drug screen, both paid for by the sponsor. DOT physical and drug screen may be randomly administered throughout the program. Candidates must maintain passing results throughout the term of the apprenticeship program.
(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 have the ability to perform extensive physical labor, including but not limited to: digging with a hand bar or shovel to expose live utilities, pushing, pulling, climbing into and out of trenches and manholes and over and under obstacles. Must be able to work in confined spaces elevated work areas (ladders and lifts greater than 40ft), and outdoors (year round) in all types of weather.
Other: Must have ability to balance, have hand-eye coordination, and physical fitness to perform minimum labor tasks. Must be an employee of P&CG, Inc. for a minimum of six-months. Candidates most recent performance appraisal must be satisfactory. Candidates must have had no safety violations or disciplinary actions in place within the past six-months. Must have and maintain a valid NYS Driver's License throughout the entire duration of the program.
Other: May be required to operate company vehicles. Must have reliable transportation to and from work and classes at the approved school. Must be flexible in changes to work schedule and travel. Must be willing and able to complete a minimum of 144 hours of classes per year at the approved school. Must be able to read, write, hear, and understand verbal and written instructions in English. Must have basic PC skills, such as keyboard typing and knowledge of Microsoft systems.
Application forms may be obtained: From: To:
Name: Peter Wierzba
Address: 96 W. River Road, Scottsville, NY 14546
Days: Monday - Friday Times: 8am - 4pm
Phone: (585) 889-8500 Email:
Special Instructions: NYS Department of Lab Apprentice Training
AUG 0 9 2024
Central Office
All Applications Must be (please check) Received Postmarked No Later Than:



Sponsor Code	78101
Trade Code(s)	18-514

Selection Standards and Evaluations

.ddress: City:					
Only those checked apply. Educational Achievement		Maximum Points Allowable	Number of Years Credited	Score	
	Total	30			Total
Points for Each Year of Education Past Grade 12 or Equivalent as Recognized by Local Educational Authorities		4		100 100	The second
Points for Each Year of Related Technical Education Past Grade 9	V		-		00 les
or Equivalent as Recognized by Local Educational Authorities		16	-		_
Points for Each Trade Related Adult or Continuing Education Course Completed		10			- BUE 3
Other:			A mendi		
Mork Experience					-
Vork Experience	Total	17			Total
Points for Each Year of Trade Related Work Experience		5			
Points for Each Year of Active Military Experience		5			_
Points for Each Year of General Work Experience		2			de la
Other: 1 point for each year as an EMT, Firefighter, or Military Reserves		5	F- 407 26	1	
Seniority	T				7
	Total	5			Tota
Points for Each Year of Employment with The Sponsoring Firm	1.1	3		-	
Other:					inini - s
Job Aptitude					Tota
Name of Aptitude Test:					
Administered by	11	1000			fu it itu't er
Other:			Latarantina		
Oral Interview: Not to Exceed 40% of Total Score	Total	40			Total
Ability to Communicate		10			
✓ 1 Willingness to Accept Obligation of Apprenticeship		10			1-50
✓ 1 Ability to Reason and Comprehend		10			
Interest and Motivation		10		1	
Other:					
Other:			(A. Mariana)	N. C.	
			Total		
Total Allowable Points	\rightarrow	92	Score →		
		Rank			
aluated by:					ne e
(Name)			NYS Depa Appren	rtment of L tice Trainin	-abor q
onsor Name: Power & Construction Group, Inc					To the order
onsor Address: 96 West River Road, Scottsvillle, NY 14546			AUG	0 9 2024	V 1
Ulisul Address:					



www.labor.ny.gov

Apprenticeship Unit

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.

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 (https://newyork.usnlx.com) for a minimum of five full working days before selections are made. 1 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 (https://newyork.usnlx.com). 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: The above signature must be the employer's Chief Executive Officer or the Chair of the Joint Apprenticeship Committee or their authorized representative. PETER D. WIERZBA EXECUTIVE

PETEN D. WIENZBA EXECUTIVE V.P.

Approved by:

New York State Department of Labor

Sponsor Name Power & Construction Group, Inc. Sponsor Code 78101

No. of Apprentices

Trade(s) Electrician, Electrical (Outside) Line worker, Skilled Trade Code(s) 17-072, 17-071, 18-514

11ade Code(3) 17 072, 17 071, 10 014

- CONST. CRAFT LABOREN

AT 602 (12/21)

NYS Department of Labor Apprentice Training

AUG 0 9 2024