APPRENTICE AGREEMENT

(SINGLE PUBLIC WORKS PROJECT ONLY)

The Employer referenced below has been awarded a bid on the below-listed Public Works Project and is not signatory to a Collective Bargaining Agreement with any labor union or labor organization within the geographic area for which the Employer will be performing work. Nothing in this Apprentice Agreement (“Agreement”) shall be construed in any way whatsoever as binding the Employer to any Collective Bargaining Agreement.

The below-listed Public Works Project meets the specifications of Senate Bill 207 of the 2019 Nevada Legislative Session (“Statute”), which requires employment of Apprentices in Public Works. The Employer is not a sponsor of an Apprenticeship Program covering the applicable trade or craft in the State of Nevada. The Employer requests the dispatch of Mr./Ms. ________________________, a registered Apprentice in the ___________________ (“Registered Apprenticeship Program”), whose Apprentice number is _______ (“Apprentice”), to the Employer for purposes of completing the below-listed Public Works Project.

Name of Employer: ______________________________________________________________

Employer’s Address: ______________________________________________________________

Nevada State Contractors

Board License Number: _____________________________________________________________

Telephone Number: ______________________________________________________________

Fax No.: ___________________ Email: _________________________________________________

This Agreement applies only to the following Public Works Project:

Name of Project: __________________________________________________________________

Project Address: __________________________________________________________________

________________________________________________________________________________

General Contractor: _______________________________________________________________

Owner: __________________________________________________________________________

Starting Date: ___________________________________________________________________

Duration: _________________________________________________________________________

The Employer agrees as follows:

(1) The Employer agrees to employ the Apprentice on the Public Works Project and provide the Apprentice supervised experience and training by a qualified Journeyworker on-the-job. The provisions of Nevada law governing Apprentices, including the Statute, and the Apprenticeship Standards for the

This is not an official or approved form of the Office of the Labor Commissioner. The Office of the Labor Commissioner does not have jurisdiction over the approval, registration, standards, or agreements governing Registered Apprenticeship Programs or Registered Apprentices pursuant to Nevada Revised Statutes section 610 and Nevada Administrative Code section 610.
Registered Apprenticeship Program, are hereby incorporated into this Agreement. An official copy of the Apprenticeship Standards is on file with the Nevada State Apprenticeship Council.

(2) For the Public Works Project referenced above (only), the Employer agrees to pay fringe benefit contributions to the below-listed employee benefit Trust Funds on behalf of the Apprentice, pursuant to the terms of the Trust Agreements creating them. The Employer shall pay the below-listed hourly contributions rates to each applicable Trust Fund, and any other employee benefit Fund required, for each hour worked by the Apprentice on the Public Works Project. Contribution payments shall be made at the time, place and in the manner directed by the Trust Funds’ Administrator.

   a. Pension, Annuity or Retirement

      Name of Fund:
      Hourly Contribution Rate:

   b. Health and Welfare

      Name of Fund:
      Hourly Contribution Rate:

   c. Vacation

      Name of Fund:
      Hourly Contribution Rate:

   d. Apprenticeship Training

      Name of Fund:
      Hourly Contribution Rate:

   e. Other bona fide fringe benefit Funds, as follows:


<table>
<thead>
<tr>
<th>Name of Fund</th>
<th>Purpose of Fund</th>
<th>Hourly Contribution Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(3) The Employer agrees to submit a complete monthly fringe benefit Contribution Report, identifying all work performed by the named Apprentice (subject to this Agreement), together with payment of any amounts owed. Both the Contribution Report and payments shall be submitted to the Administrator designated by the employee benefit Trust Funds, and to any other employee benefit Fund listed above.
(4) The Employer agrees that payments and the completed Contribution Reports shall be mailed or submitted to the employee benefit Trust Funds’ Administrator no later than the _____( ___ ) day of the month following the month in which the named Apprentice worked the Public Works Project hours.

(5) The Employer agrees that if payment is late, or delinquent, the Employer will also pay interest, damages and costs of the late payment, pursuant to the terms of the Trust Fund Agreements and/or employee benefit Fund documents.

(6) The Employer agrees to permit the employee benefit Trust Funds, Administrator and/or their agents or other authorized representatives, to review and audit the Employer’s payroll and related records, including Certified Payroll Reports, to verify the hours reported by the Employer against the actual hours worked by the named Apprentice on the Public Works Project covered by this Agreement.

(7) If any provision of this Agreement is found unenforceable, it shall not affect the enforceability of the remaining provisions of this Agreement to the extent permitted by applicable Nevada law or the Statute.

(8) This Agreement contains the entire agreement and understanding between the Employer, the Apprenticeship Program and the Apprentice and no representations were made or relied upon by the Employer other than those expressly contained herein. No other information may be relied upon in construing the terms of this Agreement.

EMPLOYER: ____________________________________________

Date: ____________________________ By: ____________________________

Authorized Employer Representative Signature

[Name of Apprenticeship Program Committee]

Date: ____________________________ By: ____________________________

__________________________, Director of Apprenticeship

[Name of Trust Funds and/or Fringe Benefit Funds]

Date: ____________________________

Print Name of Trust Funds’ Representative

REGISTERED APPRENTICE:

Date: ____________________________

Apprentice Name and Signature