



TEAMSTERS GENERAL LOCAL UNION No. 346

Affiliated with the International Brotherhood of Teamsters

2802 West First Street • Duluth, MN 55806
218/628-1034 • Fax 218/628-0246

Email: local@teamsters346.com

Mailing Address
P.O. Box 16208
Duluth, MN 55816-0208

Trustees

GARY BAUERS
DOUG DUNSMOOR
JON ELLEGARD

ZAK RADZAK
President
LES KUNDO
Vice President
JEFF OVESON
Recording Secretary
CHAD WARD
Business Agent

RODERICK ALSTEAD
Secretary - Treasurer

April 13, 2016

Dear Brothers and Sisters,

In order for you to be on our Non Local Member out of work list we require the following information from you:

Completed Application (Either faxed or emailed to you with this letter)

A copy of your DOT Health Card (Small Form)

A copy of your drivers license (Front and Back)

A current Union dues receipt if you are a member of a Teamsters Local that is not 346, **if you are not a member of any Teamsters Local, please disregard the Union dues receipt.**

IF you have any questions about these requirements please contact Jessica or Nick at (218)-628-1034, or email Nick directly at nick@teamsters346.com.

Thank You,

TEAMSTERS GENERAL LOCAL NO. 346

Local 346 Dispatcher

Buy American

TEAMSTERS GENERAL LOCAL UNION No. 346: "Teamsters General, the northwestern portion of the state of Wisconsin, and the Northern Minnesota Counties of Cook, Lake, St. Louis, Carlton, Koochiching, Lake of the Woods, Itasca, Beltrami, Aitkin, Pine, Chisago, Crow Wing, Cass, Wadena, Otter Tail, Becker, Hubbard, Clearwater, Roseau and Pennington. Construction only in the following: Polk, Marshall, Kittson, Clay, Red Lake, Norman and Mahnomen. Pipeline: Minnesota, Wisconsin, North Dakota, South Dakota and Iowa (excluding Scott County)."

REFERRAL LIST APPLICATION

NAME _____ Social Security Number _____
(last) (first) (m.i.)

ADDRESS _____
Street or PO Box City State Zip

PHONE NUMBERS: Home _____ Cell _____
(Please List Only Your Home and/or Cell Phone #)

ARE YOU A MEMBER OF THE TEAMSTERS UNION?(Circle) YES NO

IF SO, WHAT LOCAL NO. _____ ARE YOU A MEMBER IN GOOD STANDING? _____

LICENSE CLASS(A or B): _____ (Include copies of front and back of driver's license) _____
Expiration

ENDORSEMENTS:(Circle) Hazardous Tanker Passenger School Bus Doubles Triples

EXPERIENCE:(Circle only if you have had at least three months Experience) Belly Dump Boom Truck
Bottle Truck Dump Truck Flat Bed Float Lull Type Forklift Front End Loader Grapple Truck
Rollagon Skid Truck Tandem Track Vehicle(Marooka) Tractor Trailer Transit Mixer Water Truck
Winch Truck *Articulated Dump Truck *Fuel *Low Boy *Off Road *Stinger *Stringing

*Please list Experience on Back of Sheet for the *Starred Trucks, or you will not be considered for them.
ADDITIONAL QUALIFICATIONS: _____

DO YOU HAVE PIPELINE EXPERIENCE? Yes No (If Yes List Last Pipeline Employer)

DO YOU HAVE CONSTRUCTION EXPERIENCE? Yes No (If Yes List Last Construction Employer)

DO YOU HAVE MSHA TRAINING?(Circle) Yes No DOT CARD Expiration Date _____
(Include copy of Certificate) (Include Copy of the Card)

DO YOU HAVE OSHA 10?(Circle) Yes No Would you be willing to travel out of our jurisdiction
(Include copy of Card) for pipeline work, etc? (Circle) Yes No

I certify that all of the above information and the information listed on the back of this sheet is true and correct:

SIGNATURE _____

DATE: _____

Office Use Only
GROUP # _____

EXPERIENCE FOR ARTICULATED DUMP, FUEL, LOW BOY, OFF ROAD, STINGER and/or STRINGING TRUCK(Specify if you actually have strung pipe, or if you just racked pipe.):

EMPLOYER

DATES OF EXPERIENCE

CLASSIFICATIONS(Type of Truck)

_____	_____	_____
_____	_____	_____
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