

STATE OF FLORIDA
PUBLIC EMPLOYEES RELATIONS COMMISSION
4708 Capital Circle N.W., Suite 300
Tallahassee, Florida 32303
(850) 488-8641

Do Not Write In This Box

CASE NUMBER

RA-

DATE FILED

RECOGNITION-ACKNOWLEDGEMENT PETITION

Check box if petition seeks to add classifications to an existing bargaining unit represented by the petitioner ("opt-in"). Certification No. _____.

PART I - REQUEST FOR RECOGNITION

INSTRUCTIONS:

Part I is to be completed by the union which is requesting recognition by the public employer. This form is to be served on the employer representative indicated in item 5 below. If more space is required for any item, attach additional sheets, numbering items accordingly.

***The Commission utilizes e-service as the primary method of delivery for orders, correspondence, and notices. Parties are responsible for ensuring that their email address on file with the Commission is correct and current.**

The petitioner hereby requests recognition by the public employer as the exclusive bargaining agent for the employees in the classifications listed in item 6 below:

1. NAME OF PETITIONER: Local 3080, Metro-Broward Professional F F, IAFF

Email Address: _____

Address: 8000 N. University Drive

Tamarac, FL 33321-2118

Zip Code

2. PETITIONER REPRESENTATIVE: Brian Powell

Title: President

Phone No. 954-783-1250

Email Address: president@3080fire.com

Address: 8000 N. University Drive

Tamarac, FL 33321-2118

Zip Code

3. PERC REGISTRATION NUMBER OF PETITIONER: OR-OR-2010-031

Expiration of current registration: September 9, 2022

4. NAME OF EMPLOYER: City of Coconut Creek
Address: 4800 West Copans Road
Coconut Creek, FL 33063
Zip Code

5. EMPLOYER REPRESENTATIVE: Karen M. Brooks
Title: City Manager Phone No. 954-973-6720
Email Address: kbrooks@coconutcreek.net
Address: 4800 West Copans Road
Coconut Creek, FL 33063
Zip Code

6. DESCRIPTION OF UNIT CLAIMED to be appropriate for the purpose of collective bargaining. (List individually all job classifications proposed for inclusion.)

INCLUDED:

Fire Inspector
Fire Inspector/Training Specialist
Sr. Fire Inspector
Firefighter/Paramedic
Driver Engineer
Lieutenant
Captain
Battalion Chief

EXCLUDED:

All other positions

7. APPROXIMATE NUMBER OF EMPLOYEES in the unit claimed to be appropriate: 65

8. (a) Is this request supported by more than 50% of the employees in the proposed bargaining unit?
 YES NO

(b) If answer to (a) is YES, describe the method by which the public employer may verify the majority status claimed by the organization.

Local 3080 requests that the authorization cards for Local 3080 and payroll records with signature of employees be provided to a priest, minister, rabbi, or any other neutral person. That person or persons can compare the signatures to determine whether Local 3080 represents a majority of persons in the bargaining unit.

9. DATE THIS REQUEST WAS MAILED OR DELIVERED to public employer: 11/24/2021



Signature of Petitioner Representative

PART II - RECOGNITION-ACKNOWLEDGEMENT AND NOTICE TO EMPLOYEES

INSTRUCTIONS:

If the public employer recognizes the petitioner/organization as the collective bargaining agent for the employees in the proposed unit, Part II is to be completed and submitted to the organization, attaching copies of the job descriptions, if any, for all classifications of employees to be included in the unit. The public employer should simultaneously serve copies of the executed form without job descriptions upon those employee organizations listed in 14, below.

10. Does the organization have the support of a majority of the employees in the proposed unit?
 YES NO

11. TOTAL NUMBER OF EMPLOYEES IN THE UNIT proposed in item 6: 65

12. DESCRIPTION OF THE METHOD BY WHICH THE MAJORITY STATUS OF THE EMPLOYEE ORGANIZATION HAS BEEN VERIFIED:

Petitioner (Local 3080) and the Employer (City) agreed to have a local chaplain, Ronald Perkins, count the signed interest cards and compare them to another signed document in the City's possession. Chaplain Perkins followed this process on March 7, 2022 and affirmed that 49 of the 65 eligible employees signed interest cards with no reason to suspect any fraudulent activity in collecting the signatures.

18. (a) The public employer recognizes the employee organization named in item 1 as the collective bargaining representative of the employees in the unit described in item 6.
- (b) Attached hereto is documentary evidence of such recognition (e.g., formal resolution or official minutes reflecting the act of recognition).
- (c) The public employer has mailed copies of this executed form and attachments to the organizations listed in item 14.

19. DATE OF EXECUTION OF PART II: _____

Signature of Employer Representative

PART III - PETITION

INSTRUCTIONS:

Upon receipt of Part II from the public employer, the employee organization shall execute Part III and file the fully executed Petition and a copy of the job descriptions for all classifications of employees to be included in the unit with the Commission.

20. NAME AND TITLE OF PERSON EXECUTING PART III, if different from Petitioner Representative in item 2 above:

NAME: _____

Title: _____ Phone No. _____

Email Address: _____

Address: _____

Zip Code

I have read the above form and all attachments. The statements contained therein are true to the best of my knowledge and belief.

21. DATE OF EXECUTION OF PART III: _____

Signature of Petitioner Representative

**FALSE STATEMENTS MAY RESULT IN FINE AND IMPRISONMENT
PURSUANT TO CHAPTER 837, FLORIDA STATUTES**