



New York State Department of Labor

Apprentice Training Program Transmittal

SP: ATP: 13-363

Sponsor Parise Mechanical ,Inc.		District Western-Bflo.
Name , local no. and address of union (If none, write none) none		
Trade / Occupation Plumber & Pipefitter		Requested date 4/6/15
<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Joint	<input type="checkbox"/> JAC
<input type="checkbox"/> Group	<input checked="" type="checkbox"/> Non-Joint	<input checked="" type="checkbox"/> Non-JAC
Indentured by:		<input checked="" type="checkbox"/> State
<input checked="" type="checkbox"/> Employer	<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Federal

New program (explain "Yes" answers in Comments below)

Date A.A. Plan **4/6/15**
and program copy to DEOD

(For Construction Trades Only)

	Yes	No		Yes	No		Yes	No
New Trade	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Waiver of ratio requested	<input type="checkbox"/>	<input type="checkbox"/>	Public Works violations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other A.T. programs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Work process change	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Federal wage and hour violations	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Description of sponsor:

Parise Mechanical Inc.(PMI) provides HVAC design, installation and service for residential, commercial, industrial and institutional clients. [REDACTED]

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New York State Department of Labor

Apprentice Training Program Registration Agreement

Revision New Program (nature of change)

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APPRENTICE TRAINING CENTRAL OFFICE

State Use Only	
AT sponsor no.	
ATP code	13-363
Effective date of AT program	

- Name of sponsor: Parise Mechanical, Inc.
- Mailing address: 1106 Sheridan Drive (number & street) Tonawanda (city) New York (state) 14150 (zip code) Erie (county)
- Actual address: Same as above (number & street) (city) (state) (zip code) Erie (county)
- Telephone no.: (716) 694-4900 (telephone #) (ext. #) (716) 694-7988 (fax #)
- Trade/Occupation: Plumber & Pipefitter
- No. employees: 25 No. apprentices: 1 No. journeyworkers: 1 7. Ratio: 1:1:1:3 (non-standard)
- ISC code: 9. DOT code: 862-281-022 10. Length of program: 60 months
- Apprentice probationary period: 12 Months 12. Work process: Standard or Revised
- Minimum journeyworker rate: \$32.41 per hour 14. Effective date of wages: 7/1/14
- 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"/> 12 H <input type="checkbox"/>	M <input type="checkbox"/> H <input type="checkbox"/>								
45%	55%	65%	75%	90%					

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

17. *Samuel A. Parise* 2/12/15
 Signature of official sponsor representative Date
 Samuel A. Parise - President
 Print name and title

18. _____ / /
 Signature of union representative Date

 Print name, title, and union name

19. _____ / /
 Signature New York State Department of Labor Date



New York State Department of Labor

SPONSOR #
ATP # 13-363

Sponsor Information Sheet

Instructions:

- Please complete all questions. If a question does not apply to your entity, please enter 'N/A.'
You must include an explanation and supporting documentation for all "yes" responses.
For Individual Joint Programs, you must submit a completed AT 9 form from the applicant/sponsor and from the union.
For Individual Non-Joint Programs, you must submit a completed AT 9 form from the applicant/sponsor only.
For Group Joint Programs, you must submit a completed AT 9 form from the applicant/sponsor and each signatory company and union that serves on the governing body as a Joint Apprenticeship Training Committee (JATC) member. Only one AT 9 is required per union.
For Group Non-Joint Programs, you must submit a completed AT 9 form from the applicant/sponsor and each signatory company that serves on the Board of Directors or other governing body of the applicant/sponsor.
You must have the completed form notarized by a Notary Public or certified by a Commissioner of Deeds or we will not accept it.

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APPRENTICE TRAINING
CENTRAL OFFICE

Form with fields: Sponsor Name: Parise Mechanical, Inc., Trade Name: Plumber&Pipefitter, Name of Entity Completing Form: Parise Mechanical, Inc., FEIN No., Mailing Address: 1106 Sheridan Dr. Tonawanda, NY 14150, NYS Employer Registration, Fax No., Phone No., E-mail Address, Type of Entity, How many years has your organization been in business? 14 years, Have you done business under a different name?, Is the Sponsor a Group Joint or Group Non-Joint Program?

Answer all questions below. For all yes responses, attach explanation and/or appropriate documentation.

Within the past five (5) years has your organization, any affiliate, any predecessor company or entity, owner of 5% or more of the entity's shares, director, officer, partner, or proprietor been the subject of:

Table with 2 columns: Question and Yes/No response. Questions include: A conviction for a crime under state or federal law?, An indictment or pending indictment for any conduct constituting a crime under state or federal law?, A grant of immunity for any conduct constituting a crime under state or federal law?, A federal suspension, debarment, bid rejection or disapproval 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?, Any pending or open investigation of a possible violation of any federal law or regulation, including but not limited to, investigations by the National Labor Relations Board (NLRB), Occupational Safety and Health Administration (OSHA), or US Department of Labor (USDOL) Wage and Hour Division?, Any determination of a violation of a federal law or regulation including, but not limited to, determinations by the NLRB, OSHA, or the USDOL Wage and Hour Division?, Any pending or open investigation of a possible violation of New York State, any other state, or municipal law or regulation including, but not limited to, investigations by the Bureau of Public Work?, Any determination of a violation of any state or municipal law or regulation, including, but not limited to, Public Work violations? If yes, was the violation determined to be willful?, Any stipulations, settlement, consent order or like agreement involving any state, municipal or federal enforcement action (judicial or regulatory)?, 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?



NEW YORK STATE DEPARTMENT OF LABOR
RELATED INSTRUCTION AVAILABILITY

SPONSOR #
ATP # 13-363

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MAR 17 2015

Workforce Dev. & Trng
BUFFALO

Trade
Plumber & Pipefitter
Sponsor Name
Parise Mechanical, Inc.
Sponsor's Representative
Samuel A.Parise
Sponsor Address (No. & Street) (City)
1106 Sheridan Dr Tonawanda
(County) (State) (Zip Code)
Erie NY 14150
Sponsor Telephone No.
(716) 694-4900
Proposed Number of Apprentices
1

RELATED INSTRUCTION IS NOTAVAILABLE

RELATED INSTRUCTION ISAVAILABLE AT:

Name of School Orleans/Niag. BOCES
E.C.C.
Address Bflo. Public Schools

Address

School Representative:

Ed Holewinski
Marcia Johnson

Name and Address of DLEA:

Ed Holewinski
Elderwood village@Westwood
580 Orchard Park Rd
West Seneca, NY 14224

AT Office Name and Address:

Apprentice Training Representative:

Date Prepared:

Signature of DLEA

Date Prepared: 3-12-15

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APPRENTICE TRAINING
CENTRAL OFFICE



**New York State
Department of Labor
Apprentice Training Recruitment Notification and
Minimum Qualifications**

SP:
ATP: 13-363

Parise Mechanical, Inc. _____, located at
(Sponsor)
1106 Sheridan Dr. Tonawanda, New York 14150

(Address)

is presently accepting applications for an estimated _____ 1 _____ apprentice training positions in
(No. of openings)
the occupation of _____ Plumber & Pipefitter _____
(Trade)

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 Diploma, (GED or TASC)

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

(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: some BOCES Training

Other: Must have clean NYS Drivers License- apprentice on occassion required to drive company vehicles

Other: _____

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Application forms may be obtained from: _____ Dates: From: _____ to: _____

Name: Parise Mechanical, Inc. _____ Days: _____

Address: 1106 Sheridan Dr _____ Times: _____
Tonawanda, NY 14150

Phone number: (716) 694-4900 _____ Email address: _____

Special instructions: _____

All applications must be received/postmarked (please circle) no later than _____

See Instructions on Reverse Side



NEW YORK STATE DEPARTMENT OF LABOR
SELECTION STANDARDS AND EVALUATION

Sponsor Code: _____

ATP Code: 13-363

NAME OF CANDIDATE		TRADE <u>Plumber and Pipefitter</u>	
ADDRESS	CITY	STATE	ZIP

ONLY THOSE CHECKED APPLY

EDUCATIONAL ACHIEVEMENT

<input checked="" type="checkbox"/>	<u>1</u>	POINTS FOR EACH YEAR OF EDUCATION PAST GRADE <u>12</u> OR EQUIVALENT AS RECOGNIZED BY LOCAL EDUCATIONAL AUTHORITIES	TOTAL
<input checked="" type="checkbox"/>	<u>1</u>	POINTS FOR EACH YEAR OF RELATED TECHNICAL EDUCATION PAST GRADE OR EQUIVALENT AS RECOGNIZED BY LOCAL EDUCATIONAL AUTHORITIES	<u>12</u>
<input checked="" type="checkbox"/>	<u>1</u>	POINTS FOR EACH TRADE RELATED ADULT OR CONTINUING EDUCATION COURSE COMPLETED	
<input type="checkbox"/>		OTHER _____	

MAXIMUM POINTS ALLOWABLE	NUMBER OF YEARS CREDITED	SCORE
12		
4		
4		
4		

TOTAL

WORK EXPERIENCE

<input checked="" type="checkbox"/>	<u>5</u>	POINTS FOR EACH YEAR OF TRADE RELATED WORK EXPERIENCE	TOTAL
<input checked="" type="checkbox"/>	<u>5</u>	POINTS FOR EACH YEAR OF ACTIVE MILITARY EXPERIENCE	
<input checked="" type="checkbox"/>	<u>5</u>	POINTS FOR EACH YEAR OF GENERAL WORK EXPERIENCE	
<input type="checkbox"/>		OTHER _____	

60		
20		
20		
20		

TOTAL

SENIORITY

<input type="checkbox"/>		POINTS FOR EACH YEAR OF EMPLOYMENT WITH SPONSORING FIRM	TOTAL
<input type="checkbox"/>		OTHER _____	

TOTAL

JOB APTITUDE

<input type="checkbox"/>		SATB (SPECIFIC APTITUDE TEST BATTERY) POINTS FOR HIGH _____ MEDIUM _____ LOW _____	TOTAL
<input type="checkbox"/>		NAME OF ALTERNATIVE APTITUDE TEST: _____	
<input type="checkbox"/>		ADMINISTERED BY _____	
<input type="checkbox"/>		OTHER _____	

TOTAL

ORAL INTERVIEW: NOT TO EXCEED 40% OF TOTAL SCORE

<input checked="" type="checkbox"/>	<u>1</u>	ABILITY TO COMMUNICATE	TOTAL
<input checked="" type="checkbox"/>	<u>1</u>	WILLINGNESS TO ACCEPT OBLIGATION OF APPRENTICESHIP	
<input checked="" type="checkbox"/>	<u>1</u>	ABILITY TO REASON AND COMPREHEND	
<input checked="" type="checkbox"/>	<u>1</u>	INTEREST AND MOTIVATION	
<input type="checkbox"/>		OTHER _____	
<input type="checkbox"/>		OTHER _____	

20		
5		
5		
5		
5		

TOTAL

TOTAL ALLOWABLE POINTS



92

TOTAL SCORE



RANK _____

EVALUATED BY _____ DATE _____

SPONSOR NAME Parise mechanical Inc

SPONSOR ADDRESS 1106 Sheridan Drive, Tonawanda NY 14150



Parise Mechanical Inc.

1106 Sheridan Drive • Tonawanda, NY 14150 • Phone: 694.4900 • Fax: 694.7988

SPONSOR #
ATP # 13-363

Non-Discrimination Plan

EQUAL OPPORTUNITY PLEDGE: OUR COMPANY RECOGNIZES THAT ALL PERSONS 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, 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 NY, part 600; and the Americans with Disabilities Act of 1990.

SEXUAL HARASSMENT PREVENTION POLICY: OUR POLICY IS THAT SEXUAL HARASSMENT IS PROHIBITED. This policy applies to internal treatment 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; or
- such conduct has the purpose for 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 division of Equal Opportunity Development 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 for AT 505, Notice of Apprentice Training Opportunity, and Form AT 508 Selection Standards and Evaluation, attached.

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APPRENTICE TRAINING
CENTRAL OFFICE



Parise Mechanical Inc.

1106 Sheridan Drive • Tonawanda, NY 14150 • Phone: 694.4900 • Fax: 694.7988

SPONSOR #
ATP # 13-363

RECRUITMENT: It is agreed that the sponsor will recruit applicants for apprenticeship by (check one):

Listing all apprentice openings with NYS Department of Labor Community Services Division for a minimum of five full working days before selections are made.

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 NYS Department of Labor Community Services Division.

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 above named sponsor, I certify that it is our intent to fulfill these Equal Opportunity Standards.

Signature of Sponsor: _____

M. M.

Date: _____

2/12/15