## IBEW LOCAL 48 VOLUNTEER PROJECT REQUEST FORM

MEMBER NAME:	SIGNATURE	:
MEMBER PHONE NUMBER:	DATE:	
VOLUNTEER PROJECT NAME:	DATE OF V	OLUNTEER WORK:
VOLUNTEER PROJECT LOCATION:		
DOES THIS PROJECT REQUIRE AN ELECT SUPERVISOR?	RICAL PERMIT?	IF YES, WHO IS THE SIGNING
IS OWNER A NOT FOR PROFIT ENTITY?		
WHICH ELECTRICAL CONTRACTOR DO THEY NORMALLY USE?		
DO THEY AGREE TO USE A UNION ELECTRICAL CONTRACTOR FOR ALL PAID WORK?		
NOTES/COMMENTS:		
THIS REQUEST FORM IS:	APPROVED	☐ NOT APPROVED
BUSINESS MANAGER:		DATE:

