

**STATE OF NEW MEXICO  
PUBLIC EMPLOYEE LABOR RELATIONS BOARD**

\_\_\_\_\_,  
Petitioner

State or National Affiliation: \_\_\_\_\_  
(If Applicable)

and

PELRB No

\_\_\_\_\_,  
Respondent

**PETITION FOR CLARIFICATION**

Petitioner seeks clarification of an existing collective bargaining unit represented by the  
Petitioner.

In support thereof, Petitioner STATES:

1. The existing bargaining unit to be clarified comprises the following positions:

2. Petitioner seeks: (Check one)

To accrete the following positions into the existing bargaining unit:

or,

Some other change in the scope and description of the existing bargaining unit (including merger or realignment), described as follows:

3. The existing bargaining unit was certified on or about \_\_\_\_\_.

4. The requested clarification or accretion is warranted by the following change in circumstances surrounding the creation of the existing bargaining unit:

5. The geographic work location(s) of the employees in the existing unit is/are as follows:

6. The geographic work location(s) of the petitioned-for employees is/are as follows:

7. IF Petitioner seeks an accretion, Petitioner further STATES: (continue to Paragraph 8, if Petitioner does NOT seek an accretion).

a. Petitioner estimates the existing bargaining unit includes \_\_\_\_\_ employees.

b. Petitioner estimates the unit proposed for accretion includes \_\_\_\_\_

employees. (**NOTE:** If the number to be accreted is 10% or greater than the number of employees in the existing Bargaining unit, Petitioner **MUST** proceed via standard Petition for Certification, PELRB Form # 3.)

- c. There \_\_\_\_\_ a collective bargaining agreement (CBA) in effect covering the existing bargaining unit. If there IS a CBA in effect, a copy is attached.
- 8. The required showing of interest is hereby filed contemporaneously with this Petition.
- 9. The Petition does not present a question concerning representation.
- 10. Petitioner states the following additional facts relevant to the Petition:
  
- 11. The parties' contact information is as follows:

PETITIONER

Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

RESPONDENT

Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### **DECLARATION**

I declare that I have read the above petition and certify under penalty of perjury that the statements herein are true to the best of my knowledge and belief.

Signature of Petitioner's Representative: \_\_\_\_\_

Printed name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Certificate of Service**

I hereby declare that a true and correct copy of this Petition was served on the following representatives of the Respondent by:

Hand delivery

US Mail

Electronic submission

on or about \_\_\_\_\_

Party served

Organization: \_\_\_\_\_

Name of individual served: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional persons served:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name