



STATE OF NEW JERSEY
 PUBLIC EMPLOYMENT RELATIONS COMMISSION
 PO BOX 429
 TRENTON, NEW JERSEY 08625-0429

For Courier Delivery
 495 West State St.
 Trenton, NJ 08618

**PAYROLL DEDUCTION DETERMINATION
 REPRESENTATION FEE PETITION**

INSTRUCTIONS: File an original and 4 copies of this petition with the Chairman of the Public Employment Relations Commission, together with proof of service of a copy of the petition on the respondent(s). If more space is required for any item, attach additional sheets, numbering the items accordingly. See N.J.A.C. 19:19-1 et seq. See additional instructions on back.

DO NOT WRITE IN THIS SPACE

DOCKET NO.

DATE FILED:

1. PETITIONER (Majority Representative)

Full Name:

Address (Street and Number, City, State and Zip Code):

Name and Title of Representative to Contact:

Telephone No.

FAX No.

Attorney/Consultant (if any):

Telephone No.

FAX No.

Attorney/Consultant Address (Street and Number, City, State and Zip Code):

2. RESPONDENT(S) (Public Employer)

Full Name:

County:

Address (Street and Number, City, State and Zip Code):

Name and Title of Representative to Contact:

Telephone No.

FAX No.

Attorney/Consultant (if any):

Telephone No.

FAX No.

Attorney/Consultant Address (Street and Number, City, State and Zip Code):

3. COLLECTIVE NEGOTIATIONS UNIT

a. Unit Description:

b. Number of unit employees: _____

c. Number of unit employees voluntarily paying dues: _____

d. Established by recognition on _____ . Certification issued in Docket No. _____ on _____ .
 (Month, Day, Year) (Copy attached) (Month, Day, Year)

e. Term of current or recent contract, if any, if none, so state _____ to _____
 (Month, Day, Year) (Month, Day Year)

4. NEGOTIATIONS OVER REPRESENTATION FEES

During negotiations which occurred on or about _____, the majority representative demanded that the employer agree to deduct representation fees from the paychecks of non-members and no agreement between the parties has been reached.

5. CERTIFICATION

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Petitioning Party and Affiliation, if any _____

By _____
 (Signature of Authorized Representative) (Title)

Date _____

**INSTRUCTIONS FOR FILING A
PAYROLL DEDUCTION DETERMINATION PETITION**

1. Type or clearly print all information.
2. Fill in **all** sections of the form.
3. Attach any pertinent certification of majority representative issued by the Commission or recognition agreement executed by the employer or recognition clause contained in the parties' current or most recent collective negotiations agreement.
4. Attach a list of the employees in the negotiations unit who are voluntary dues paying members of the majority representative as of the time of the filing of this petition, and attach any documents pertinent to verifying that list.
5. Attach a written copy of the demand and return system, as required by N.J.A.C. 19:17-3.3(a), to be used by the majority representative if payroll deductions are ordered.
6. Sign the certification.
7. File an original and four (4) copies with the Chairman of the Public Employment Relations Commission.
8. Submit proof that you served a copy of this petition on the respondent(s). Proof can take the form of a signed statement explaining how, when and upon whom the petition has been served.