Fields marked with an asterisk (\*) are mandatory.

# ONTARIO LABOUR RELATIONS BOARD

# **RESPONSE/INTERVENTION -**APPLICATION FOR ACCREDITATION CONSTRUCTION INDUSTRY

Labour Relations Act, 1995

Form A-93

Confirmation No. 20250924131635702

		-			
OLRB File Number	1563-25-R				
Between: *					
Personnel & Material	Hoist Employers'	Association			
					Applican
		_	and -		Арричан
International Union of	Operating Engin		ana		
		,			
				Res	ponding Part
Review Information	Bulletin No. 33 – "A	Accreditation in the	Construction Indust	ry under s.136 of the <i>Labour R</i>	elations Act,
1995 (Non-ICI)", the	1995 (Non-ICI)", the Filing Guide and the Board's Rules of Procedure on acceptable methods of delivery and filing before				
completing this form	ı to avoid any delay	y in processing.			
All forms, Notices, Information Bulletins, the Filing Guide and the Rules of Procedure may be obtained from the Board's				the Board's	
website (http://www.olrb.gov.on.ca).					
<ul> <li>To print a paper copy of this form, use only the "Print" buttons located within the form.</li> </ul>					
		-			
Save a copy of your completed form and any attachments as the Board will not return them to you. To save the form at any			the form at any		
time, use the "Save"	buttons located w	ithin the form.			
If there is insufficient	t space on the form	n, attach additional	pages clearly identi	fying the relevant section of the	form. For
e-filing, you may att	ach files by selectin	ng the "Attach docui	ments electronically	" option.	
Choose one of the foll	owing * ✓	Response	Intervention	ı	
Part A Contact Info	ormation				
Instructions					

- Provide the contact information for each Responding Party/Intervenor on whose behalf this form is being completed and any Affected Party not previously named in the application below. If you wish to add additional parties, use the "Add" button or attach a separate page if completing the form by hand.
- For an organization, provide the name and contact information of an individual who will be able to respond on behalf of that organization. When adding multiple individuals at the same organization, "Add" an additional contact section, repeat the organization name and provide that individual's contact information (e.g. name, email address, phone number).

1 (a). Responding Party/Interver	nor				
Responding Party 1					
Type *	Individual				
Organization Name					
International Union of Operating En	gineers, Local 793				
First Name	Last Name			Position	n/Title
Melissa	Atkins-Mahaney			Labour	Relations Mgr
Full Address (Number, Street, Unit/Apartment 2245 Speers Road	, Building Name)		Other Address Details	S (e.g. PC	) Box, R.R. #, c/o)
City/Town	Province/State	Country			Postal/Zip Code
Oakville	ON	Canada			L6L 6X8
Telephone Number Ext. 905-469-9299 2221	Fax Number 905-465-4343	Email Admatkins	ldress @iuoelocal793.org		
Additional Contact Information, if any (A	ssistant's Email Address, Alternate T	eiepnone Nu	imbers)		
4 (h) Poprogontativa/Contact D	aroon for the Deepending	Dorty/In	tow/ones		
1 (b). Representative/Contact Po	erson for the Responding	Party/in	tervenor		
Contact 1					
Contact Person for * All Partie	es above Party No.(s)				_
Indicate if this person is a	Paralegal				
Organization Name					
International Union of Operating English					
First Name	Last Name *			Position	
Kathryn	Bell	1			Counsel
Full Address (Number, Street, Unit/Apartment 2245 Speers Road			Other Address Detail	S (e.g. PC	,
City/Town	Province/State	Country			Postal/Zip Code
Oakville	ON	Canada			L6L 6X8
Telephone Number Ext. Fax Number Email Address kbell@iuoelocal793.org					
Additional Contact Information, if any (A Farnaz Talebpour, Legal Counsel, ft William Daniels, Legal Assistant, wo	talebpour@iuoelocal793.or	elephone Nu <b>g</b>	imbers)		
2 (a). Affected Party					
Contact information for any person, trac and which has not already been identified		-	-	affected	by the application
2 (b). Representative/Contact Pe	erson for the Affected Par	rty, if kno	own		
2 (c). The person, trade union, e		rganizati	on named above is	affect	ed by the

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3. Provide a detailed description of unit of employers claimed by the Responding Party to be appropriate for accreditation:

Reference **must** be made to the sector(s) of the construction industry and the geographic area(s) or parts thereof claimed. If you require more space, attach a separate document.

The Responding Party agrees that the unit of employers set out in Schedule "A" to the Applicant's Form A-92 is a unit appropriate for accreditation.

4. Provide representations as to the appropriateness of the unit described in question 3 including the history of collective bargaining, if any, of the Applicant and the Responding Party:

If you require more space, attach a separate document.

The PMHEA is an association of employers of employees who are represented by Local 793 and who are engaged in the erecting, dismantling, servicing and maintaining personnel and material hoists and mobile cranes in the construction industry in the province of Ontario. The Applicant and the Responding Party are bound by the Personnel and Material Hoist/ Erectors/ Dismantlers/ Services & Repair Agreement Collective Agreement effective May 1, 2025 to April 30, 2028 (the "Collective Agreement"). The Collective Agreement is applicable to all sectors of the construction industry in Ontario except the industrial, commercial and institutional sector. The Applicant, on behalf of its members who have delegated bargaining authority to it, and the Responding Party, bargain the Collective Agreement. The Applicant and the Responding Party have been parties to the Collective Agreement since 2022.

5.	State the number of employers in the unit described by the Applicant as being appropriate for accreditation as of
	the date the application was made:

6. State the number of employers in the unit claimed by the Responding Party to be appropriate for accreditation as of the date the application was made:

7. State the approximate number of members of the Responding Party working in the area(s) and sector(s) described in the unit of employers claimed by the Applicant to be appropriate as of the date the application was made:

107

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## 8. In respect of the order(s) requested by the Applicant, the Responding Party states:

The Responding Party agrees that the Applicant is entitled to be accredited as the exclusive bargaining agent of the unit of employers set out in the Schedule "A" to the Applicant's Form A-92.

#### Other relevant statements:

The Responding Party's list of employers who have had employees working in the proposed bargaining unit in the year immediately preceding the application filing date is attached as Schedule "A" to this Response.

For clarity, Local 793 obtained bargaining rights with 2869759 Ontario Ltd. in March 2025, but no remittances have been made to the Union since that date, and the Union understands that there have been no employees of that company working in the bargaining unit since that date.

### 10. Attached documents:

Provide a list of the documents you are filing together with this form as instructed below.

Name your documents/attachments so that they are easily identifiable.

If you are e-filing this form, select the "Attach documents electronically" option below and attach each document using the "Add File" button.

If you are filing in a manner other than e-filing, provide the numbered list of documents in the box below.

✓ Attach documents electronically

Note: If your attachments exceed 15MB, you may not e-file. File a paper copy of this form with all attachments using an alternative method permitted by the Board's Rules of Procedure.

File	Description	Size (MB)	
2025.09.24 OLRB 1563-25-R PMHEA OLRE	В	0.25	
Schedule A - Local 793 Response to PMHE		0.29	
	Total Size	0.54	
	Total space left over	14.46	
	Number of attachments	2	
	2025.09.24 OLRB 1563-25-R PMHEA OLRE	2025.09.24 OLRB 1563-25-R PMHEA OLRB  Schedule A - Local 793 Response to PMHE  Total Size  Total space left over	2025.09.24 OLRB 1563-25-R PMHEA OLRB 0.25 Schedule A - Local 793 Response to PMHE 0.29 Total Size 0.54

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## **IMPORTANT NOTES**

The Board's forms, Notices, Information Bulletins, Rules of Procedure and Filing Guide may be obtained from its website <a href="http://www.olrb.gov.on.ca">http://www.olrb.gov.on.ca</a> or by calling 416-326-7500 or toll-free at 1-877-339-3335.

### FRENCH OR ENGLISH

Vous avez le droit de communiquer et recevoir des services en français et en anglais. La Commission n'offre pas de services d'interprétation dans les langues autres que le français et l'anglais.

You have the right to communicate and receive services in either English or French. The Board does not provide translation services in languages other than English or French.

## **CHANGE OF CONTACT INFORMATION**

Notify the Board immediately of any change in your contact information. If you fail to do so, correspondence sent to your last known address (including email) may be deemed to be reasonable notice to you and the case may proceed in your absence.

## **ACCESSIBILITY AND ACCOMMODATION**

The Board is committed to providing an inclusive and accessible environment in which all members of the public have equitable access to our services. We will aim to meet our obligations under the *Accessibility for Ontarians with Disabilities Act* in a timely manner. Please advise the Board if you require any accommodation to meet your individual needs. The Board's Accessibility Policy can be found on its website.

### COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS

Any relevant information that you provide to the Board must in the normal course be provided to the other parties to the proceeding. Personal information collected on this form and in written or oral submissions may be used and disclosed for the proper administration of the Board's governing legislation and case processing. In addition, the *Tribunal Adjudicative Records Act, 2019* requires that the Board make adjudicative records (which include applications filed and a listing of such applications) available to the public. The Board has the power to make part or all of an adjudicative record confidential. The *Freedom of Information and Protection of Privacy Act* may also address the treatment of personal information. More information is available on the Board's website <a href="www.olrb.gov.on.ca">www.olrb.gov.on.ca</a>. If you have any questions concerning the collection of information or disclosure of adjudicative records, contact the Solicitors' Office at the number listed above or in writing to the OLRB, 505 University Ave., 2nd floor, Toronto, ON M5G 2P1.

## **E-FILING AND E-MAIL**

The Rules of Procedure and Filing Guide set out the permitted methods of filing. In the event of emergencies or other circumstances, the Board may post a Notice to Community on its website, which will prevail over the Rules of Procedure and Filing Guide. You should check the Board's website prior to filing. Note that the efiling system is not encrypted. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Board will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

### **HEARINGS AND DECISIONS**

Hearings are open to the public unless the Board decides that matters involving public security may be disclosed or if it believes that disclosure of financial or personal matters would be damaging to any of the parties. Hearings are not recorded and no transcripts are produced.

The Board issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and <a href="https://www.canlii.org">www.canlii.org</a>. Some summaries and decisions may be found on the Board's website.

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## **Documents to be Delivered**

Before filing your response/intervention with the Board, you must deliver the following documents to each Applicant, Responding Party and Affected Party named in Part A of the application and to each Affected Party named in Part A of a response/intervention filed by another party:

A completed copy of this Response/Intervention - Application for Accreditation, Construction Industry (Form A-93), including
all documents you are filing with this form.

If you have named an Affected Party in Part A of your response/intervention that was **not** named in the application or in a response/intervention filed by another party, you must deliver the following documents to that party:

- A completed copy of the Application for Accreditation, Construction Industry (Form A-92), including all documents filed with that form;
- A completed copy of this Response/Intervention Application for Accreditation, Construction Industry (Form A-93), including
  all documents you are filing with this form; and
- A Notice to Responding Party and/or Affected party of Application for Accreditation, Construction Industry (Form C-39) with the names of the parties and the date inserted.

Once the above-listed documents have been delivered to the other parties, you must complete the following Certificate of Delivery before filing the completed form and attachments with the Board.

✓ I have reviewed this form to confirm it is complete *	Date (yyyy/mm/dd) * 2025/09/24
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Certificate of	Delivery
I, William Daniels , L	_egal Assistant ,
Name *	Title
certify that the documents identified above were delivered to e	each of the parties as set out below:
Note: You must complete delivery information for each party se	eparately.
Use the "Add" button below if completing electronically.	
Delivered To	
Name of organization (if applicable) and name and title of person to Sherrard Kuzz LLP Attn: Michael Sherrard and Daniel Averbach	whom the documents were delivered *
Address or fax number to which the documents were delivered * msherrard@sherrardkuzz.com; jjudd@sherrardkuzz.com; dav jbotelho@sherrardkuzz.com,	verbach@sherrardkuzz.com;
Method of delivery *	
☐ Hand Delivered ☐ Courier ☐ Fax ☐ Regular Mail ✓	Other
Other Details *	
Please provide details as to whom, when and how the documents w Delivered by email to Michael Sherrard msherrard@sherrardk Daniel Averbach daverbach@sherrardkuzz.com, on Septemb	uzz.com, Jessica Judd jjudd@sherrardkuzz.com,

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# File with the Board

- File the completed form and any attachments using a method permitted by the Board's Rules of Procedure.
- Save and Print a copy of your completed form and all attachments as the Board will not return them to you.
- To e-file, click the "Submit" button below. You will receive a confirmation email once the form has been successfully submitted.
- If you choose not to e-file, print this form by clicking on the "Print" button below and then file with the Board together with any attachments.

# For E-Filing only

You must provide a valid email address in order to file this form electronically so that a confirmation email may be sent to you. If you do not have a valid email address, file a paper copy of this form using an alternative method permitted by the Board's Rules of Procedure.

# Submitted By:

First Name *	Last Name *
William	Daniels
Email Address *	Confirm Email Address *
wdaniels@iuoelocal793.org	wdaniels@iuoelocal793.org

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