



IBEW #77 Dispatch Request

Employer: _____ Date: _____ Time: _____
 Point of Contact: _____ Cell Number: _____
 Email address for referrals: _____ Office Number: _____
 Worksite Location: _____ Report to Location: _____

Workers Needed

(Place a number for how many needed of each)

Foreman: _____ Foreman by Name: _____ Tree Trimmer Foreman: _____
 Lineman: _____ Tree Trimmer: _____
 Line Equipment Man: _____ URD Operator: _____ Tree Groundman: _____
 Groundman: _____ Meter Installer: _____ Other: _____
 Underground Tech: _____ Special Skills Required: _____

Job Details

Start Date: _____ Start Time: _____ 4-10's _____ 5-8's _____ 5 -10's _____ 6 -10's _____
 Job Duration: _____ End Date: _____ Other shift: _____
 Crew Foreman: _____
 Job Description: _____

Requirements

CDL: 1st Aid/CPR: Flagging Card: Crane Cert: Drug Testing: _____ Puget Property:

Other Requirements:

i.e. directional drill, spray card, etc.)

Transmission		Distribution		Meter Installer	Substation
Wood Pole	Steel	Underground	Overhead		

Agreement			
NECA	Underground LOA	Tree Trimming	Other

For Office Use Only

Name	Hall	Email	Mail	Done?	Classification	Date