

PLUMBING AND PIPE TRADES EMPLOYEES UNION

Communications, Electrical and Plumbing Union Shop 1, 111 McEvoy Street, Alexandria NSW 2015 Ph: 02 9310 3411 officeadmin@nswplumbersunion.com.au www.nswplumbersunion.com.au **NSW BRANCH** ABN 85 656 451 687

THEO SAMARTZOPOULOS State Secretary

CHRIS SEET Assistant Secretary

PPTEU Wage Claim Complaint Form

Member Details

Name:	Contact No:			
Address:		Suburb:	_State:	Postcode:
DOB:	Union No:	Financial: Yes/No Outs	tanding Union fo	ees owed \$
Cbus No:	ACIRT No:		PPTEF No:	
Date commenced Employment:		Date Finished Employment:		
Redundancy amount per week:		Redundancy last paid:		
Super amount per week:		Super last paid:		
I Authorise that (insert company name)to pay all monies owed to CEPU Plumbing Division NSW Branch (PPTEU) who will disburse on my behalf to necessary funds. CIRCLE; YES / NO				

Member Banking Details

Bank Name:	Account Name:
BSB Number:	Account Number:

Authorisation by Member

I hereby authorise the CEPU Plumbing Division NSW Branch (PPTEU) to proceed on my behalf and deduct any monies I owe to the Union from monies the Union recovers on my behalf. I also authorise the Union to credit my membership any monies collected on my behalf which I have not claimed within six (6) months of the finalisation of the claim. I understand I can withdraw my money any time provided it will be periodically drawn against as my dues become payable.

ENTITLEMENT FUNDS & MARSH INSURANCE AUTHORITY

On request by the CEPU Plumbing Division NSW Branch (PPTEU) I authorise Cbus, ACIRT, PPTEF and Marsh to provide personal information from my specified account to the CEPU Plumbing Division NSW Branch (PPTEU) to assist the union in recovering unpaid entitlements owed to me. Such information includes but is not limited to; my birth date & address, my employers' company name/s dates & amounts paid per employer per month, nil return dates short-paid returns, missing monthly payments and, the date the amount of last payment made to my Cbus, ACIRT, PPTEF or Marsh account. **MEMBERSHIP APPLICATION**

I hereby make application to become a member of the CEPU Plumbing Division NSW Branch (PPTEU) and, if admitted, agree to conform to the Rules of the Union. I also agree to the wage claim authorisation as set out above.

Member's Signature: ______Date: _____Date: ______Date: _____Date: _____Date: ______Date: _____Date: ______Date: __





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Employers Details

Employer:	Phone:		Fax:
Address:	Suburb:	State:	P/code:
Contact Person:		Phone:	

Site Details

Builder:	Site Delegate:		
Address:	Suburb:	State:	P/code:

Please fill in Page 3 of this form to explain your Wage Claim Accompanied with copies of payslips, records and anything in relation to your claim and return it to your Area Union Official via Post or Email: CEPU Plumbing Division NSW Branch (PPTEU) Shop 1, 111 McEvoy Street, Alexandria NSW 2015 Ph: 02 9310 3411 Fax: 02 9310 1380 Email: officeadmin@nswplumbersunion.com.au

PLEASE NOTE: The CEPU Plumbing Division NSW Branch (PPTEU) will actively seek donations to the Union's members Fund from all members who benefit from successful wage claim settlements.

OFFICE USE ONLY

AMOUNT PAID:
DATE PAID:
Organiser:
Office Record by:
Date Opened:
Date Closed:
Recorded Date:
Wage Claim No UWC:
Date Joined Union:





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PPTEU Wage Claim Complaint Form (Page 3)

Wage Claim No: UWC:

Member's Signature:	Date:

