



Work Order Request for Manpower

Date _____

Number of People Required _____

Contractor requesting manpower _____

Name of Person requesting manpower _____

Name of Job _____

Location of Job _____

Directions to Job _____

Start Date _____

Start Time _____

Specific requirements of project, _____

Job Foreman _____

Type of Work

- | | | | | | |
|--------------------|------------------------------|------|--------------------------|-------|--------------------------|
| Residential | <input type="checkbox"/> | Shop | <input type="checkbox"/> | Field | <input type="checkbox"/> |
| HVAC Commercial | <input type="checkbox"/> | Shop | <input type="checkbox"/> | Field | <input type="checkbox"/> |
| Industrial | <input type="checkbox"/> | Shop | <input type="checkbox"/> | Field | <input type="checkbox"/> |
| Architectural | <input type="checkbox"/> | Shop | <input type="checkbox"/> | Field | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | Shop | <input type="checkbox"/> | Field | <input type="checkbox"/> |
| Welder - Mig | <input type="checkbox"/> | Tig | <input type="checkbox"/> | Stick | <input type="checkbox"/> |
| Drug Test Required | Yes <input type="checkbox"/> | No | <input type="checkbox"/> | | |

Date Filled: _____

Agents Initials _____

Per contract, Local #2 Member and/or the Sheet Metal Contractor should notify Local #2 of employment changes, (hiring or dismissing) so our records can be adjusted.

Once this form has been completed please email to Agentoftheday@sheetmetal2.org or Fax to (816) 254-0018