



PIPE TRADES SERVICES MN

HEALTH & PENSION FUNDS

4461 White Bear Parkway, Suite 1 - White Bear Lake, MN 55110 • Phone: 651-645-4540 • Fax: 651-645-8119 • www.PTSMN.org

Contractor Association Change Form

Important Notes:

- **This form is only used if you are a current contributing employer to the PTSMN benefit funds and are making a CHANGE to the Contractor Association that receives the Industry Funds associated with your employees.**
- **If you are a new employer please click on the link for the “New Contractor Form”**
- The “Contractor Association Change Form” is used by contributing contractors and PTSMN to allow employers to designate a change in the Contractor Association that will receive their Industry Fund contributions.
- By signing and submitting this form you will authorize a change in the distribution of these funds and a change in Bargaining Rights.
- This form may only be submitted to the Pipe Trades Services MN office one time per calendar year per contractor on either of two dates:
 1. On or before March 1st to be effective May 1st unless revoked in writing by the contractor before April 1st.
 2. On or before September 1st to be effective November 1st unless revoked in writing by the contractor before October 1st.
- These rules apply uniformly to all contributing employers



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IMPORTANT NOTE

This form is used by the Pipe Trades Services MN to designate the Association that receives the Industry Fund contributions.

By signing and submitting this form you will authorize a change in the distribution of these funds and a change in Bargaining Rights.

Local #15 #34 #455 #539

Please check the local(s) to which this change applies

Contractor Name _____

Contractor Authorized Signature _____

Contractor Association

PHCC _____

MMCA _____

Dated ____ / ____ / ____

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For PTSMN Office use only

Received at PTSMN and entered into the computer system on ____ / ____ / ____

By PTSMN representative _____