



CRAFT EMPLOYEE REQUEST FORM

LAX PROJECT

FAX FORM TO: NAME OF UNION _____ FAX NUMBER _____ DATE: _____

CC: LAX Local Inclusion Mgr / Courtney Evans - Tel: 945-210-0929 / cevans@lawa.org

LAX - LOCAL HIRE ZIPCODES

Impact Area (Inglewood, El Segundo, Lennox, Culver City, Hawthorne, L.A.)

90043	90044	90045	90047	90066	90094	90230	90245	90250	90293	90301	90302
90303	90304	90305									

Local Residents (Culver City, Hawthorne, L.A.)

90001	90002	90003	90004	90005	90006	90007	90008	90010	90011	90012	90013
90014	90015	90016	90017	90018	90019	90020	90021	90023	90024	90025	90026
90027	90028	90029	90031	90032	90033	90034	90035	90036	90037	90038	90039
90041	90042	90046	90048	90049	90056	90057	90058	90059	90061	90062	90063
90064	90065	90067	90068	90069	90071	90077	90089	90095	90210	90211	90212
90232	90247	90248	90272	90290	90291	90292	90402	90501	90502	90710	90717
90731	90732	90744	90810	91040	91042	91214	91303	91304	91306	91307	91311
91316	91324	91325	91326	91330	91331	91335	91340	91342	91343	91344	91345
91352	91356	91364	91367	91401	91402	91403	91405	91406	91411	91423	91436
91504	91505	91601	91602	91604	91605	91606	91607	91608	*90073		

*Veterans Administration

CRAFT WORKERS REQUEST:

QTY#	CRAFT POSITION	JOURNEYMEN OR APPRENTICE	LOCAL DISTRICT RESIDENT	DATE	TIME
			✓		
			✓		
			✓		

Please have the worker(s) report to the following project site address indicated below:

Project/Contractor Name: _____

Site Address: _____ Report to: _____

On-site Tel. #: _____ On-site Fax: _____

Comment or special Instructions: _____

Union Use Only		
Reception Date: _____	Dispatch Date: _____	Received By: _____
<u>Requested Dispatch</u> Local District Resident Worker	<u>Available for Dispatch</u> <input type="checkbox"/>	<u>Unavailable for Dispatch</u> <input type="checkbox"/>