



# ONTARIO LABOUR RELATIONS BOARD

## APPLICATION FOR ACCREDITATION, CONSTRUCTION INDUSTRY *Labour Relations Act, 1995*

Form A-92

Fields marked with an asterisk (\*) are mandatory.

Confirmation No. [20250909154020153](#)

**Between: \***

[SOUTH WESTERN ONTARIO ROAD BUILDERS ASSOCIATION](#)

**Applicant**

- and -

[LABOURERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 1059](#)

**Responding Party**

- Review Information Bulletin No. 33 – “Accreditation in the Construction Industry under s.136 of the *Labour Relations Act*, 1995 (Non-ICI)”, the Filing Guide and the Board’s Rules of Procedure on acceptable methods of delivery and filing **before** completing this form to avoid any delay in processing.
- All forms, Notices, Information Bulletins, the Filing Guide and the Rules of Procedure may be obtained from the Board’s website (<http://www.olrb.gov.on.ca>).
- To print a paper copy of this form, use **only** the “Print” buttons located within the form.
- Save a copy of your completed form and any attachments as the Board will not return them to you. To save the form at any time, use the “Save” buttons located within the form.
- If there is insufficient space on the form, attach additional pages clearly identifying the relevant section of the form. For e-filing, you may attach files by selecting the “Attach documents electronically” option.

### Part A Contact Information

#### Instructions

- Provide the contact information for each Applicant, Responding Party and Intervenor below. If you wish to add additional parties, use the “Add” button or attach a separate page if completing the form by hand.
- For an organization, provide the name and contact information of an individual who will be able to respond on behalf of that organization. When adding multiple individuals at the same organization, “Add” an additional contact section, repeat the organization name and provide that individual’s contact information (e.g. name, email address, phone number).

**1 (a). Applicant****Applicant 1**Type \* ☒ Organization ☐ Individual

Organization Name

South Western Ontario Road Builders Association

First Name

Peter

Last Name

Hamstra

Position/Title

Director

Full Address (Number, Street, Unit/Apartment, Building Name)

331 Aberdeen Drive

Other Address Details (e.g. PO Box, R.R. #, c/o)

City/Town

London

Province/State

ON

Country

Canada

Postal/Zip Code

N5V 4S4

Telephone Number

Ext.

Fax Number

Email Address

peter.hamstra@ca.crh.com

Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

**1 (b). Representative/Contact Person for the Applicant****Contact 1**Contact Person for \* ☒ All Parties above ☐ Party No.(s) \_\_\_\_\_Indicate if this person is a ☒ Lawyer ☐ Paralegal

Organization Name

Filion Wakely Thorup Angeletti LLP

First Name

Carl

Last Name \*

Peterson

Position/Title

Counsel

Full Address (Number, Street, Unit/Apartment, Building Name)

1 King Street West

Other Address Details (e.g. PO Box, R.R. #, c/o)

Suite 1201

City/Town

Hamilton

Province/State

ON

Country

Canada

Postal/Zip Code

L8P 4W9

Telephone Number

Ext.

Fax Number

905 972-6870

905 577-0805

Email Address

cpeterson@filion.on.ca

Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

Counsel: Danny Parker - dparker@filion.on.ca

Assistant: Nicole Martin - nmartin@filion.on.ca

**2 (a). Responding Party****Responding Party 1**Type \* ☒ Organization ☐ Individual

Organization Name

Labourers' International Union of North America, Local 1059

First Name

Brandon

Last Name

MacKinnon

Position/Title

Business Manager

Full Address (Number, Street, Unit/Apartment, Building Name)

635 Wilton Grove Rd.

Other Address Details (e.g. PO Box, R.R. #, c/o)

City/Town

London

Province/State

ON

Country

Canada

Postal/Zip Code

N6N 1N7

Telephone Number 519 455-8083	Ext.	Fax Number 519 455-0712	Email Address bmackinnon@liuna1059.ca
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

## 2 (b). Representative/Contact Person for the Responding Party, if known

### Contact 1

Contact Person for \* ☒ All Parties above ☐ Party No.(s) \_\_\_\_\_

Indicate if this person is a ☐ Lawyer ☐ Paralegal

Organization Name

Goldblatt Partners LLP

First Name Kris	Last Name * Lala	Position/Title Counsel
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Full Address (Number, Street, Unit/Apartment, Building Name)

20 Dundas Street West

Other Address Details (e.g. PO Box, R.R. #, c/o)

Suite 1039

City/Town Toronto	Province/State ON	Country Canada	Postal/Zip Code M5G 2C2
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Telephone Number 416-979-4244	Ext.	Fax Number 416 591-7333	Email Address klala@goldblattpartners.com
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Additional Contact Information, if any (Assistant's Email Address, Alternate Telephone Numbers)

## 3 (a). Affected Party

Contact information for any person, trade union, employer or employer's organization which may be affected by the application must be completed below.

## 3 (b). Representative/Contact Person for the Affected Party, if known

## 3 (c). The person, trade union, employer or employers' organization named above is affected by the application for the following reason(s):

## Part B Material Facts and Relief Sought

4. In support of its status as an employers' organization, the Applicant files the following documents with this application: (check all that apply)

- ☐ Charter  
☐ Constitution  
☒ Bylaws  
☐ Other: \_\_\_\_\_

5. The Responding Party Trade Union or Council of Trade Unions has been certified or has been granted voluntary recognition or has entered into a collective agreement with two or more employers in the unit of employers proposed by the Applicant. List at least two such employers and include the dates of the documents relied on:

1. Dufferin Construction Company, a division of CRH Canada Group Inc.
2. GIP Paving Inc.
3. J-AAR Civil Infrastructure Limited

Each of the above companies is signatory with the Responding Party Trade Union to a Collective Agreement executed between the Responding Party Trade Union and a collection of companies, effective from January 1, 2023 to December 31, 2025.

6. Provide a detailed description of the unit of employers that the Applicant claims to be appropriate for accreditation:

Reference **must** be made to the sector(s) of the construction industry and the geographic area(s) or parts thereof claimed. If you require more space, attach a separate document.

See Appendix "A" attached hereto.

7. Provide representations as to the appropriateness of the unit described above, including the history of collective bargaining, if any, of the Applicant and the Responding Party:

If you require more space, attach a separate document.

The South Western Ontario Road Builders Association (the "SWORBA") was created and incorporated in order to negotiate on behalf of the local contractors as an accredited employer bargaining agency.

The SWORBA was created by a group of companies/contractors who engage in construction in the roads and heavy engineering sectors of the construction industry in South Western Ontario (except in respect of construction already covered by a subsisting accredited collective agreement), and who all had historically negotiated and entered into a single collective agreement with the Responding Party. This long standing collective agreement is the appropriate local agreement covering contractors in the identified sectors in Board Area 3, and this application arises as a result of the evolution of that longstanding collective agreement.

Since forming the SWORBA, the original group of companies/contractors has expanded to include other interested companies/contractors who also engage in construction in the roads and heavy engineering sectors of the construction industry in South Western Ontario, and who now makeup the members of the SWORBA.

The Applicant believes it is the appropriate time to seek accreditation and create the mandatory common collective agreement in Board Area 3, for Board Area 3 contractors, as envisioned in the accreditation provisions of the Act.

8. State the approximate number of employers in the unit described in question 6:

25

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**9. List the employers in the unit described in question 6:**

If you require more space, attach a separate document.

[See Appendix "B" attached hereto.](#)

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**10. State the approximate number of employees of employers in the unit described in question 6 on the payroll of each such employer for the weekly payroll period immediately preceding the date of this application:**

249

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**11. State the nature of the authority relied upon by the Applicant to act as bargaining agent for employers in the unit of employers:**

For example, authority to act as bargaining agent may, in the case of memberships in the Applicant, stem from the Applicant's constitution or by laws; or in the case of members or non-members, from a specific authorization by an employer.

[The By-Laws of the SWORBA and the Authorization Forms signed by its members authorize the Applicant to act as the bargaining agent for employers in the unit and to apply for accreditation in that capacity.](#)

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**12. Other relevant statements:**

[Enclosed are the Applicant's By-Laws, and the relevant Collective Agreement between the Respondent Union and the Board Area 3 contractors that initially founded and formed the SWORBA.](#)

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**13. Attached documents:**

Provide a list of the documents you are filing together with this form as instructed below.

Name your documents/attachments so that they are easily identifiable.

If you are e-filing this form, select the "Attach documents electronically" option below and attach each document using the "Add File" button.

If you are filing in a manner other than e-filing, provide the numbered list of documents in the box below.

☒ Attach documents electronically

Note: If your attachments exceed 15MB, you may not e-file. File a paper copy of this form with all attachments using an alternative method permitted by the Board's Rules of Procedure.

No.	File	Description	Size (MB)	
1	2025-09-09 Ltr to OLRB re Appl for Accreditation	Letter to Registrar	0.36	<input type="checkbox"/>
2	LIUNA Appendix A and B to Form A-92 - Bulletin	Schedule A and B to Form A-92	0.28	<input type="checkbox"/>
3	LIUNA C-39 - Notice to Responding Party and Bulletin	Notice and Bulletin	2.9	<input type="checkbox"/>
4	LIUNA 1059 signed agreement 2023-2025(2)	Collective Agreement	1.4	<input type="checkbox"/>
5	General Operating By-law.pdf	By-law	1.17	<input checked="" type="checkbox"/>
		Total Size	6.11	
		Total space left over	8.89	
		Number of attachments	5	

## DECLARATION

I, Danny Parker, the Counsel of the Applicant  
(name) (office)

herein, declare that:

1. I have knowledge of the affairs of the Applicant;
2. The Applicant is an employers' organization that represents employers who operate businesses in the construction industry.

Date (yyyy/mm/dd): 2025/09/09

If you are not submitting this form electronically, sign below.

\_\_\_\_\_  
Signature

☒ If you are submitting this form electronically, check this box in the place of your signature affirming your declaration.

The Board's forms, Notices, Information Bulletins, Rules of Procedure and Filing Guide may be obtained from its website <http://www.olrb.gov.on.ca> or by calling 416-326-7500 or toll-free at 1-877-339-3335.

### FRENCH OR ENGLISH

Vous avez le droit de communiquer et recevoir des services en français et en anglais. La Commission n'offre pas de services d'interprétation dans les langues autres que le français et l'anglais.

You have the right to communicate and receive services in either English or French. The Board does not provide translation services in languages other than English or French.

### CHANGE OF CONTACT INFORMATION

Notify the Board immediately of any change in your contact information. If you fail to do so, correspondence sent to your last known address (including email) may be deemed to be reasonable notice to you and the case may proceed in your absence.

### ACCESSIBILITY AND ACCOMMODATION

The Board is committed to providing an inclusive and accessible environment in which all members of the public have equitable access to our services. We will aim to meet our obligations under the *Accessibility for Ontarians with Disabilities Act* in a timely manner. Please advise the Board if you require any accommodation to meet your individual needs. The Board's Accessibility Policy can be found on its website.

### COLLECTION AND DISCLOSURE OF INFORMATION AND DOCUMENTS

Any relevant information that you provide to the Board must in the normal course be provided to the other parties to the proceeding. Personal information collected on this form and in written or oral submissions may be used and disclosed for the proper administration of the Board's governing legislation and case processing. In addition, the *Tribunal Adjudicative Records Act, 2019* requires that the Board make adjudicative records (which include applications filed and a listing of such applications) available to the public. The Board has the power to make part or all of an adjudicative record confidential. The *Freedom of Information and Protection of Privacy Act* may also address the treatment of personal information. More information is available on the Board's website [www.olrb.gov.on.ca](http://www.olrb.gov.on.ca). If you have any questions concerning the collection of information or disclosure of adjudicative records, contact the Solicitors' Office at the number listed above or in writing to the OLRB, 505 University Ave., 2nd floor, Toronto, ON M5G 2P1.

### E-FILING AND E-MAIL

The Rules of Procedure and Filing Guide set out the permitted methods of filing. **In the event of emergencies or other circumstances, the Board may post a Notice to Community on its website, which will prevail over the Rules of Procedure and Filing Guide. You should check the Board's website prior to filing.** Note that the e-filing system is not encrypted. Contact the Client Services Coordinator at the numbers listed above if you have questions regarding e-filing or other filing methods. If you provide an e-mail address with your contact information, the Board will in most cases communicate with you by e-mail from an out-going only generic account. Incoming emails are not permitted.

### HEARINGS AND DECISIONS

Hearings are open to the public unless the Board decides that matters involving public security may be disclosed or if it believes that disclosure of financial or personal matters would be damaging to any of the parties. Hearings are not recorded and no transcripts are produced.

The Board issues written decisions, which may include the name and personal information about persons appearing before it. Decisions are available to the public from a variety of sources including the Ontario Workplace Tribunals Library and [www.canlii.org](http://www.canlii.org). Some summaries and decisions may be found on the Board's website.



Documents to be Delivered

Before filing your application with the Board, you must deliver the following documents to each Responding Party and Affected Party named in Part A of this application:

- A completed copy of this Application for Accreditation, Construction Industry (Form A-92), **including all documents you are filing with this form**; and
- A Notice to Responding Party and/or Affected Party of Application for Accreditation, Construction Industry (Form C-39) **with the names of the parties and the date inserted**.

**Note to each Responding Party and Affected Party:** The documents listed above should have been delivered to you by the Applicant. The applicable response/intervention form is **Form A-93**.

**Once the above-listed documents have been delivered to the other parties, you must complete the following Certificate of Delivery before filing the completed form and attachments with the Board.**

<input checked="" type="checkbox"/> I have reviewed this form to confirm it is complete *	Date (yyyy/mm/dd) * 2025/09/09
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## Certificate of Delivery

I, Gina Radin, Legal Assistant,  
Name \* Title

certify that the documents identified above were delivered to each of the parties as set out below:

**Note: You must complete delivery information for each party separately.**

Use the "Add" button below if completing electronically.

### Delivered To

Name of organization (if applicable) and name and title of person to whom the documents were delivered \*

Mr. Kris Lala, Goldblatt Partners LLP, Counsel, Labourers' International Union of North America, Local 1059

Address or fax number to which the documents were delivered \*

416-591-7333

### Method of delivery \*

☐ Hand Delivered ☐ Courier ☒ Fax ☐ Regular Mail ☒ Other

### Fax Details \*

The documents were delivered by fax on 2025/09/09, at 3 : 15 ☐ a.m. ☒ p.m.

### Other Details \*

Please provide details as to whom, when and how the documents were delivered.

and via email: klala@goldblattpartners.com

### Delivered To

Name of organization (if applicable) and name and title of person to whom the documents were delivered \*

Mr. Brandon MacKinnon, Business Manager, Labourers' International Union of North America, Local 1059

Address or fax number to which the documents were delivered \*

5194550712

### Method of delivery \*

☐ Hand Delivered ☐ Courier ☒ Fax ☐ Regular Mail ☒ Other

### Fax Details \*

The documents were delivered by fax on 2025/09/09, at 3 : 15 ☐ a.m. ☒ p.m.

### Other Details \*

Please provide details as to whom, when and how the documents were delivered.

and via email: bmackinnon@liuna1059.ca

## File with the Board

- File the completed form and any attachments using a method permitted by the Board's Rules of Procedure.
- Save and Print a copy of your completed form and all attachments as the Board will not return them to you.
- To e-file, click the "Submit" button below. You will receive a confirmation email once the form has been successfully submitted.
- If you choose not to e-file, print this form by clicking on the "Print" button below and then file with the Board together with any attachments.

### For E-Filing only

You must provide a valid email address in order to file this form electronically so that a confirmation email may be sent to you. If you do not have a valid email address, file a paper copy of this form using an alternative method permitted by the Board's Rules of Procedure.

Submitted By:

First Name \*

Gina

Last Name \*

Radin

Email Address \*

[gradin@filion.on.ca](mailto:gradin@filion.on.ca)

Confirm Email Address \*

[gradin@filion.on.ca](mailto:gradin@filion.on.ca)