DEC 06 2010

U.S. Department Labor
Employment and Training Administration

OMB Control No. 1205-0134
Expiration Date: November 30, 2012

Agricultural and Food Processing Clearance Order ETA Form 790
Pedido de Empleados para Agricultura y Procesamiento de Alimentos

1. Employer's Name and Address (Number, Street, City, State, and Zip Code)/ Nombre y Dirección del Empleador (Numero, Calle, Ciudad, Estado y Código Postal)

Walnut Grove Farm, LLC
59 Walnut Lane
Staatsburg, NY 12580

Telephone number/Teléfono: 845-266-8299 Fax: 845-266-5004

2. Location and Direction to Work Site/ Ubicación y Dirección al Lugar de Trabajo

59 Walnut Lane, Staatsburg NY/
South on 9G, left onto County Rt.14, left onto Walnut Lane

(If additional space is needed, use separate sheet of paper/ Si necesitas más espacio, utilices otra hoja de papel)

3. Location and Description of Housing / Dirección y Descripción de la Vivienda

59 Walnut Lane, Staatsburg NY/
Apartment with all facilities
Capacity: 2

(See attachment/para mas detalles vea #7)

(If additional space is needed, use separate sheet of paper / Si necesitas más espacio, utilices otra hoja de papel)

Nos. 4 - 8 for STATE USE ONLY
Números 4 a 8 para USO ESTATAL

4. Industry Code/Código Industrial: 111334

5. Job Order No. /Num. de Orden de Empleo: NY0963801

6. Occupational Title and Code /Titulo Ocupacional y Código: 45-2091 Agricultural Equip. Oper.

7. Clearance Order Issue Date / Fecha de Tramite: DEC 13 2010

8. Job Order Expiration Date / Fecha de Expiración: 2-15-11

9. Anticipated Period of Employment / Período Anticipado de Empleo

From/ Desde: Feb 15, 2011 To/Hasta: Dec 15, 2011

10. No. of Workers Requested / Num. de Trabajadores Solicitados: 2

11. Anticipated Hours of Work per Week/Horas Anticipadas de Trabajo por Semana. Total: 40

Sunday / Domingo 0 Monday / Lunes 7
Tuesday / Martes 7 Wednesday / Miércoles 7
Thursday / Jueves 7 Friday / Viernes 7
Saturday / Sábado 5

12. Collect Calls Accepted from/ Aceptan Llamadas por Cobrar de:

Employer / Empleador Yes/Si ■ No ☐
Local Office / Oficina Local Yes/Si ☐ No ■

13. Board Arrangements / Arreglo de Alojamiento

Workers must buy and prepare own food.
(See attachment/para mas detalles vea #4)

14. Referral Instructions / Instrucciones sobre cómo Referir Candidatos

Apply directly with employer, Gregory Quinn (845-266-8299), or at your nearest One Stop office.
(See attachments/para mas detalles vea #5 & #6)

15. Job Specifications / Especificaciones del Trabajo

Drive and operate farm equipment to till soil, plant and cultivate currant crops. Operate, adjust and maintain a currant harvester. Propagate ribes plants using all seasonal methods. Manually plant, cultivate prune and harvest currants. Must have 6 months of verifiable experience in the aforementioned.

Conducir y utilizar maquinaria agrícola para labrar la tierra, sembrar y cultivar cosechas de grosella. Operar, ajustar y mantener una cosechadora de grosella. Ribes propagar plantas que utilizan todos los métodos de temporada. Manual de plantar, cultivar y ciruelas pasas de Corinto de la cosecha. Debe tener 6 meses de experiencia comprobable en el antes mencionado.

(See attachment/para mas detalles vea #1)

(If more space is needed, summary of Material Job Specifications in ENGLISH can be included in separate document, and may also be included in SPANISH)

16. Wage Rates, Special Pay Information and Deductions / Tarifa de Pago, Información Sobre Pagos Especiales y Deducciones (Rebajas)

Crop Activities / Cultivos	Hourly Wage / Salario por Hora	Piece Rate / Unit(s) / Pago por Pieza / Unidad(es	Special Pay (bonus, etc.) / Pagos Especiales (Bono, etc.)	Deductions / Deducciones	Yes/Si	No	Pay Period / Periodo de Pago
Equipmt. Op.	$ 14.95	$ N/A	None	Social Security / Seguro Social	■	☐	Weekly / Semanal
Propogate Currants	$ 14.95	$ N/A	None	Federal Tax Impuestos Federales	■	☐	☒
Gen.Farmwork/ Currants	$ 14.95	$ N/A	None	State Tax Impuestos Estatales	■	☐	Bi-weekly / Quincenal
	$	$		Meals / Comidas	☐	■	☐
	$	$		Other (specify)/ Otro (especifica)	☐	■	Other / Otro ☐

More Details About the Pay / Mas Detalles Sobre el Pago

None/Ninguno

(If additional space is needed, use separate sheet of paper. / Si necesitas más espacio, utilice otra hoja de papel)

17. Transportation Arrangements / Arreglos de Transportación

(See attachments/para mas detalles vea #5 & #6)

(If additional space is needed, use separate sheet of paper. / Si necesitas más espacio, utilices otra hoja de papel)

18. Is it the prevailing practice to use Farm Labor Contractors (FLC) to recruit, supervise, transport, house, and/or pay workers for this (these) crop activity (ies)? ¿ Es la práctica habitual de usar Contratistas de Trabajo Agricola para reclutar, supervisar, transportar, dar vivienda, y/o pagarle a los trabajadores para este(os) tipo(s) de cosecha(s)? Yes / Si ☐ No ☒

If you have checked yes, what is the FLC wage for each activity? / Si contesto "Si," cual es el salario que le pagas al Contratista de Trabajo Agrícola por cada actividad?

19. Unemployment Insurance provided? Seguro de Desempleo? Yes/Si ■ No ☐

20. Workers' compensation insurance provided? Se le provee seguro de compensación/indemnización al trabajador: Yes/Si ■ No ☐

21. Are tools provided at no charge to the workers? / Se les proveen herramientas sin costo alguno a los trabajadores? Yes/Si ■ No ☐

22. List any arrangements which have been made with establishment owners or agents for the payment of a commission or other benefits for sales made to workers. (If there are no such arrangements, enter "None") / Enumere todos los acuerdos o convenios hechos con los propietarios del establecimiento o sus agentes para el pago de una comisión u otros beneficios por ventas hechas a los trabajadores. (Si no hay ningún acuerdo o convenio, indique "Ninguno")

None/Ninguno

23. List any strike, work stoppage, slowdown, or interruption of operation by the employees at the place where the workers will be employed.
(If there are no such incidents, enter "None") / Enumere toda huelga, paro o interrupción de operaciones de trabajo por parte de los empleados en el lugar de empleo. (Si no hay incidents de este tipo, indique "Ninguno")

None/Ninguno

24. Address of Order Holding Office (include Telephone number)/Dirección de la Oficina donde se radico la oferta (incluya el número de teléfono)	25. Name of Local Office Representative (include direct dial telephone number) / Nombre del Representante de la Oficina Local (Incluya el número de teléfono de su linea directa)
NYS Department of Labor One Stop office nearest you	NYS Department of Labor One Stop Office nearest you

26. Employer's Certification: This job order describes the actual terms and conditions of the employment being offered by me and contains all the material terms and conditions of the job.
Certificación del Empleador: Esta orden de trabajo describe los términos y condiciones del empleo que se le ofrece, y contiene todos los términos y condiciones materiales ofrecidos.

President

Employer's Signature & Title/ Firma y Titulo del Empleador Date: DECEMBER 1, 2010

READ CAREFULLY, In view of the statutorily established basic function of the Employment Service as a no-fee labor exchange, that is, as a forum for bringing together employers and job seekers, neither the ETA nor the State agencies are guarantors of the accuracy or truthfulness of information contained on job orders submitted by employers. Nor does any job order accepted or recruited upon by the One-Stop Career Center constitute a contractual job offer to which the One-Stop Career Center, ETA or a State agency is in any way a party.

LEA CON CUIDADO, En vista de la función básica del Servicio de Empleo establecida por ley, como una entidad de intercambio laboral sin comisiones, es decir, como un foro para reunir a los empleadores y los solicitantes de empleo, ni ETA ni las agencias del estado pueden garantizar la exactitud o veracidad de la información contenida en las órdenes de trabajo sometidas por los empleadores. Ni ninguna orden de trabajo aceptado o contratado en el Centro de Carreras (One-Stop Career Center) constituyen una oferta de trabajo contractuales a las que el One-Stop Career Center, ETA o un organismo estatal es de ninguna manera una de las partes.

Public Burden Statement

The public reporting burden for responding to ETA Form 790, which is required to obtain or retain benefits (44 USC 3501), is estimated to be approximately 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and reviewing the collection. The public need not respond to this collection of information unless it displays a currently valid OMB Control Number. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden, to the U.S. Department of Labor, Migrant and Seasonal Farmworker Program, Room S4209, 200 Constitution Avenue, NW, Washington, DC 20210.

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ATTACHMENT #1

May also include performing tasks such as planting stock and loading and unloading trucks, clearing fields and hedgerows, burning brush and moving fencing.

Employer will furnish to workers, without cost, all tools and equipment required in the performance of the duties assigned. Workers should report for work with their own suitable work clothing. Field and greenhouse temperatures may range from 30 degrees to 100 degrees with possible wet morning conditions.

During temporary periods of time when work specified in the order is not available, the worker may be assigned any combination of the following related tasks: (Specify tasks) Dates of Activity for crop activities: (for 2 or more crops)

Crop/Activity	Dates of Activity	Tasks

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ATTACHMENT #2

Assurances & Requirements

GENERAL: (a) The terms and conditions of this order shall be no less favorable than those contained in any existing labor contract or agreement by me or my agent for the same type of work. A copy of the Work Agreement and/or Job Order shall be posted in the labor camp and be made available. A copy of the Job Order will be provided to the worker no later than the day on which the worker begins employment. The employer assures that the working conditions of this order comply with the applicable Federal and State employment related laws and agrees to abide by the regulations at 20 CFR 655.103, Assurances, and 20 CFR 653.501.

(b) Duly authorized State and Federal representatives (including outreach workers) will be allowed reasonable access to the workers during normal working hours.

(c) Workers hired under this order will be required to show evidence of right to work in the United States.

(d) Workers must be able to demonstrate that they are physically able to perform the work specified in this Job Order.

Starting Date:
(a) The employer may amend the starting date of need by informing the H2A Central Office in Albany no later than 2/05/11. If the employer fails to amend the date of need, the employer shall pay eligible workers referred through the interstate clearance system a minimum rate of the current wage rate for each eight (8) hour work day in the first week on which those workers were present and available for work and no work specified in the Job Order is offered.(Hours required per week x current wage = Total dollar amount earned:
_40_ x $14.95_ = _$598._)

(b) Failure of workers referred against this order to notify the local office of their continued interest and/or verify the date of need no sooner than _2/06/11_ nor later than _2/10/11_ will disqualify the worker from the above assurance.

(c) Ending date: An extension of employment beyond the period of employment in the Job Order shall not relieve the employer from paying wages already earned, transportation/subsistence expenses and bonuses if applicable.

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Crew Leaders - (a) Employer will not contract with crew leaders currently in violation of the Migrant and Seasonal Worker Protection Act (MSPA).

(b) Employer will negotiate any and all crew leader fees directly with the crew leader.

(c) Crew Leaders anticipating employment in New York State will be required to register with the New York State Department of Labor and pay the required $200 crew leader registration fee in addition to any other fees that may be applicable.

Workers Needed - Total number of migrant and seasonal farmworkers needed _2_.

Wage Information - (a) An hourly rate of not less than the Federal or State minimum wage, the Adverse Effect Wage Rate (AEWR), the prevailing hourly rate or the employers hourly rate, whichever is highest, is guaranteed to the worker for the period of employment. In the event DOL promulgates a new AEWR during the recruitment or work contract period which is lower than the current AEWR at the time of application, this lower AWER will become the guaranteed minimum (unless there is a prevailing hourly rate which is higher than the AEWR).

(b) If a piece rate is offered on the Job Order, the work at the piece rate will be guaranteed to the workers for the stated period of employment unless crop activity is such that the piece rate will not realize the workers an hourly equivalent of at least the current AEWR, in which case the worker will be paid the equivalent of an hourly rate of not less than the AEWR, the Federal or State minimum rate, the prevailing hourly rate or the employer's hourly rate, whichever is highest.

(c) The employer will make the following deductions: (1) FICA (as required) (2) Federal/State tax withholdings (as required)

(d) Employer will maintain adequate payroll records. Workers will be paid weekly on __Tuesday___for work through_Monday_. A written statement showing (1) employer's full name and address, (2) worker's social security number, (3) total hours offered and total hours actually worked or total number of units, if piece rate, (4) total earnings for the pay period, and (5) deductions will be furnished the worker each pay day. (See attachment No. 6 for payday/workweek applicable to this order).

ATTACHMENT #4

(e) The employer guarantees to offer employment for a minimum of three-fourths of the workdays of the total specified period during which the job order, and all extensions thereof, are in effect. This guarantee begins with the first workday after the worker's arrival at the place of employment and ends on the date specified on the job order or extensions thereof. Workers will not be required to work more than eight hours per day, on their Sabbath or Federal holidays, to meet this guarantee. The worker's average hourly earnings will be used under this guarantee where wages are paid on a piece rate basis.

(f) Workers with school age children who have migrated with such children and who depart in time to return home for the beginning of the school year shall be paid, in addition to the basic wages, any bonus or other incentive payments or other expenses to which they would be entitled had they stayed the entire job order period.

(g) The employer may terminate worker's employment hereunder at any time with **notification to the local New York State Department of Labor office** for any of the following reasons:

(1) Refusing, without just cause, to perform the duties for which the worker was recruited and hired.

(2) Committing a serious act of misconduct or breach of discipline.

(3) Failure to reach productivity standards, <u>if applicable</u>. (See Attachment #6)

(4) Job Abandonment- being absent for more than one (5) work days without prior notification to the employer.

When worker is terminated under any of these provisions, or if the worker voluntarily terminates his employment, the employer shall not be liable for the three-fourths guarantee.

<u>Work Schedule</u> - Workers are expected to work at least the number of days and hours specified on the Job Order. However, depending on weather, crop or other conditions, workers may be requested, but not required, to work up to six days per week and/or on their Sabbath and up to <u>10</u> hours per day.

<u>Clarifications</u> - (a) Employer (will not) provide three meals per day and will deduct $__n/a_____ per day. (Deductions will not depress the minimum wage).

(b) Employer (will) furnish free dishes, cooking utensils and convenient kitchen and cooking facilities.

(c) Employer (will) provide transportation to assure workers access to stores where they can purchase groceries and/or other incidentals.

<u>Housing</u> - Housing, beds, bedding and mattresses will be furnished at no cost to the workers. Employer assures that housing will be clean and in compliance with all applicable standards during the occupancy. Workers will be responsible for maintaining housing and surrounding area in a neat and clean manner.

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ATTACHMENT #5

Referral Information - In order to assure the most effective referral and placement of workers, all referrals should be made during normal business hours.

In addition, if the person designated as the contact person on the Summary of Employment Conditions sheet attached to this order is not available for an extended period of time, there will be someone available at the farm to process referrals.

Collect calls will be accepted only from officials of New York State Department of Labor offices.

Transportation - (a) Employer agrees to reimburse inbound transportation and subsistence expenses to each worker, or any person, government agency or private organization which, on behalf of the worker has paid or advanced such transportation and subsistence expenses, from the residence, place of last employment or place of recruitment to the job site after the worker has completed 50% of the stipulated period of employment from initial date of need or from the day after actual arrival of worker if later than the stated date to report. Travel subsistence is paid at the rate of $10.64 per day for a maximum of $46.00.

(b) The employer assures that the employer will bear and pay transportation related expenses either directly to the provider of travel or indirectly to reimburse the worker so that the workers weekly pay is not diminished below the applicable Federal minimum wage required by Section 6 of the Fair Labor Standards Act, 29 USC 201.

(c) Employer will provide or pay the cost of return transportation and subsistence to each worker who completes the employment period, or who is terminated for medical reasons, or as the result of an Act of God, enroute from place of employment to place of recruitment, except when the worker is not returning to his place of recruitment and had subsequent employment with an employer, who will bear transportation expenses.

(d) Employer will not be responsible for providing return cost of transportation and subsistence enroute from place of employment to place of recruitment if the worker voluntarily abandons the job or is terminated for cause.

(e) The amount of transportation payment will be equal to the most economical and reasonable similar common carrier charges for the distance involved. All transportation provided by the employer will be by common carrier of other transportation facilities which conform to the applicable regulations of the Interstate Commerce Commission or the United States Department of Labor. If requested by the worker, the employer will assist in making transportation arrangements.

(f) Employer will provide transportation, at no cost to the worker, from the employer-provided housing to the actual work site, and return at the end of the day.

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ATTACHMENT #6

SUMMARY OF EMPLOYMENT CONDITIONS

1. Employer: _Walnut Grove Farm, LLC__
2. Referral instructions: Apply directly with employer, _Gregory Quinn_ (_845-266-8299_), or at your closest One Stop office.

3. Crop/Activity/Wage Information:

Crop/Activity	Piece Rate	Production Unit (1)	Hourly Wage (2)
Equip. Op.	N/A	N/A	$14.95
Propagate Currants	N/A	N/A	$14.95
General Farmwork/ Currants	N/A	N/A	$14.95

4. Workers will be paid weekly on __Tuesday__for work through_Monday__.

5. Workers required to be covered by Workers Compensation.
Compensation Carrier: _State Insurance Fund_ Policy #: _Z1344941-8__.
Policy holder/address :_Walnut Grove Farm, LLC/59 Walnut Lane, Staatsburg NY 12580_.

Person to be notified of injury w/phone number: _Gregory Quinn_ (845-266-8299_). Deadline for notification: **Immediately, but no later than 30 days from date of injury.**

6. Workers (will not) be covered by disability benefits.

7. Work performed under this order (will) be covered by Unemployment Insurance.

8. The employer (will not) pay overtime.

9. (a) Employer (will not) provide three meals per day and will deduct $n/a_per day. (Deductions will not depress the Federal minimum wage).

   (b) Employer (will) furnish free dishes, cooking utensils and convenient kitchen and cooking facilities.

   (c) Employer (will) provide transportation to assure workers access to stores where they can purchase groceries and/or other incidentals and/or medical necessities.

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ATTACHMENT #6
(CONTINUED)

SUMMARY OF EMPLOYMENT CONDITIONS

10. DEDUCTIONS FROM WAGES:

Type:	Amount:
Social Security	$ As Required
Federal/State Withholding Tax	$ As Required

11. **NOTES TO WORKER**

A copy of the full job order is available for inspection at the order holding office. The employer has guaranteed your first week wages unless he/she notifies this Department of Labor Office of a later starting date by _2/05/11_.

In order for you to be eligible for this guarantee, you must contact the Department of Labor Office during the period of _2/06/11__ and _2/10/11__, at:

NYS Department of Labor One Stop Office nearest you.

_____

Any Department of Labor Job Service Office will assist you in doing this.

12. Alternate work tasks to be performed, and pay during first week in case of crop delay: None

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ATTACHMENT #7

REQUEST FOR CONDITIONAL ACCESS INTO CLEARANCE SYSTEM

NAME OF EMPLOYER:_Walnut Grove Farm, LLC_.

LOCATION AND DESCRIPTION OF HOUSING:__59 Walnut Lane, Staatsburg, NY/Apartment w/ all facilities.

I hereby request conditional access into the intrastate/interstate clearance system so that my clearance order can be transmitted to labor supply states in a timely manner for the recruitment of agricultural workers.

As a condition of placing my order into clearance, I assure that such housing will be in full compliance with the requirements of the U.S. Department of Labor and Part 15 of the New York State Sanitary Code for Migrant Labor Camps by __1/16/11__ which is 30 days prior to date of need.

Representatives from the New York State Department of Labor, New York State Health Department and/or U.S. Department of Labor are invited to inspect such housing at any reasonable time to verify its condition.

December 1, 2010

EMPLOYER'S SIGNATURE **DATE**