



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

<p>1. Employer's Name and Address (Number, Street, City, State, and Zip Code) / Nombre y Dirección del Empleador (Número, calle, ciudad, y código postal)</p> <p>Raffiani & Hahn Ent., Inc 4524 Rt 32 Catskill, N.Y. 12414 518-678-2210</p> <p>Telephone number/teléfono: _____ Fax: _____</p>	<p>Numbers 4,5,6, 7 and 8 for State use only.</p>											
<p>2. Location and Direction to Work Site / Dirección del lugar de trabajo</p> <p>On Long Lane in Cairo, NY off Rt. 32.</p> <p>(If additional space is needed, use separate piece of paper)</p>	<p>4. Industry Code / Código de Industria</p> <p>111219</p>	<p>5. Job Order # / No. Orden de Empleo</p> <p>NY0967892</p>										
<p>3. Location and Description of Housing / Dirección y Descripción de la Vivienda</p> <p>A-167 Trailer on Long Lane in Cairo, NY</p> <p><u>Total Capacity</u></p> <p>2</p> <p>(See attachment / para más detalles vea)</p> <p>(If additional space is needed, use separate sheet of paper/Si necesita mas espacio, utilice documento adicional)</p>	<p>6. Occupational Title and Code / Título Ocupacional y Código</p> <p>Farmworkers + Laborers, Crop 45-2092.02</p>	<p>7. Clearance Order Issue Date / Fecha de Tramite: JAN 27 2011</p>										
<p>13. Board Arrangements / Arreglo de Alojamiento</p> <p>Workers must buy and prepare own meals. ER will take the workers shopping once a week at no cost to the worker.</p> <p>(See attachment /</p>	<p>8. Job Order Expiration Date / Fecha de vencimiento:</p> <p>3-24-11</p>	<p>9. Anticipated Period of Employment / Periodo Anticipado de Empleo</p> <p>From / Desde: To / Hasta:</p> <p>3/24/2011 12/1/2011</p>										
<p>14. Referral Instructions / Instrucciones para el Referimiento de Candidatos</p> <p>Contact Mrs. Waldron directly at 518-678-2210 between the hours of 1 and 5pm or go to the nearest One Stop Center.</p>	<p>10. No. of Workers Requested / No. de Trabajadores Pedidos</p> <p>2</p>	<p>11. Anticipated Hours of Work per Week / Horas Anticipadas de Trabajo por Semena</p> <table border="1"> <thead> <tr> <th></th> <th>Total:</th> </tr> </thead> <tbody> <tr> <td>Sunday / Domingo X</td> <td>Monday / Lunes 7</td> </tr> <tr> <td>Tuesday / Martes 7</td> <td>Wednesday / Miércoles 7</td> </tr> <tr> <td>Thursday / Jueves 7</td> <td>Friday / Viernes 7</td> </tr> <tr> <td>Saturday / Sabado 5</td> <td></td> </tr> </tbody> </table>		Total:	Sunday / Domingo X	Monday / Lunes 7	Tuesday / Martes 7	Wednesday / Miércoles 7	Thursday / Jueves 7	Friday / Viernes 7	Saturday / Sabado 5	
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<p>15. Job Specifications / Descripción del Trabajo</p> <p>Manually plant, cultivate, and harvest vegetables, fruits, and field crops. Use hand tools, such as shovels, trowels, hoes, tampers, pruning hooks, shears, and knives. Duties may include tilling soil and applying fertilizers; transplanting, weeding, thinning, or pruning crops; applying pesticides; cleaning, packing, and loading harvested products. May construct trellises, repair fences and farm buildings, or participate in irrigation activities. Set up and operate irrigation equipment. Operate tractors, tractor-drawn machinery, and self-propelled machinery to plow, harrow and fertilize soil, or to plant, cultivate, spray and harvest crops. Repair and maintain farm vehicles, implements, and mechanical equipment. Harvest fruits and vegetables by hand. Apply pesticides, herbicides or fertilizers to crops. Inform farmers or farm managers of crop progress. Identify plants, pests, and weeds to determine the selection and application of pesticides and fertilizers. Clear and maintain irrigation ditches. Record information about crops, such as pesticide use, yields, or costs. Due to safety concerns on farm workers must understand basic instructions in English. Must have one month experience in above.</p> <p style="text-align: right;">RECEIVED JAN 18</p> <p>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: EDS</p>	<p>12. Collect Calls Accepted / Se Aceptan Llamadas a Cobrar de:</p> <p>Employer / El Empleador Yes No <input checked="" type="checkbox"/> x Local Office / La Oficina Local Yes <input type="checkbox"/> No x</p>											

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
Farmworkers, laborers & Crops	\$10.16	N/a	N/a	Social Security / Seguro Social	X		Weekly / Semanal
fruits	\$10.16	N/A	N/a	Federal Tax / Impuestos Federales	X		
Vegetables	\$10.16	N/a	N/a	State Tax / Impuestos Estatales	X		Bi-weekly / cada 2 sem. X
				Meals (comidas)		X	
				Other (specify) / Otro		X	Other / Otro

More Details About the Pay / Más Detalles Sobre el Pago
 (See Attachment) NONE

(If additional space is needed, use separate sheet of paper / Si necesita más espacio, utilice documento adicional)

17. Transportation Arrangements / Arreglos de Transportación (Please explain)
 (See Attachment-1-17) Employer agrees to reimburse inband transportation to each worker after each work period. Employer has complied 50% of period of employment.

18. Is it the prevailing practice to use Farm Labor Contractors (FLC) to recruit, supervise, transport, house, or pay workers for this (these) crop activity(ies)? Es la costumbre en el área de usar Contratistas Agrícolas para reclutar, supervisar, transportar, dar vivienda, o pagarle a los trabajadores en este/estos tipo(s) de cosecha(s)/sembrado(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 paga el Contratista Agrícola para cada actividad?

19. Unemployment insurance provided / Seguro por Desempleo: Yes No

20. Workers' compensation insurance provided / Indemnización por accidente de trabajo: Yes X No

21. Are tools provided at no charge to the workers? / ¿Se le proveen las herramientas de trabajo a los trabajadores sin cargo alguno? Yes X 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") / Indique todo acuerdo o convenio con los propietarios del establecimiento o sus representantes con respecto al 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 todo huelga, paro o interrupción de las operaciones por parte de los empleados en el lugar de empleo. (Si no hay, indique "Ninguno")

None/Ninguno

24. Address of Order Holding Office (include Telephone number) / Dirección de la Oficina donde se Recibió la Orden (Incluya número de teléfono)
 New York State Department of Labor
 One Stop Office Nearest You

25. Name of Local Office Representative (include direct dial telephone number) / Nombre del Representante de la Oficina Local (Incluya número de teléfono)
 New York State 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 de trabajo y contiene todos los materiales, términos, y condiciones ofrecidas.
 Employer's Signature & Title / Firma y Título del Empleador

Paul J. Waldron Date: 01-13-11

READ CAREFULLY: In view of the statutory 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.

PUBLIC BURDEN STATEMENT
 The public reporting burden for responding to ETA Form 780, 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, D.C. 20210.

ETA Form 780 (Revised May, 2010)
 Previous versions not useable

**New York State Department of Labor
FORM ETA 790 Attachment #1
Terms and Conditions/Clarifications and Assurances**

Job Order Number: *N.Y. 0967892*

A: CLARIFICATION OF ITEMS ON FORM ETA 790

Item 3: Housing

- a. Housing and utilities are provided at no cost to H-2A workers and those workers in corresponding employment who are unable to return to their place of residence the same day.
- b. Housing beds, bedding and mattresses will be furnished at no cost to the workers.
- c. Housing will be clean and meet the applicable federal and State housing standards.
- d. Workers will be responsible for maintaining housing and surrounding areas in a neat, clean manner.

Item 15: Job Specifications

- a. Workers must be able to demonstrate that they are physically able to perform the work as described.
- b. Employer may terminate worker with notification to the New York State Department of Labor, if the worker:
 - 1) Refuses, without cause, to perform work for which the worker was recruited and hired;
 - 2) Commits serious acts of misconduct; or
 - 3) Fails, after completing any training or break-in period, to reach production standards
 - 4) Abandons Job ("Job Abandonment") – is absent for five consecutive previously scheduled days without prior notification to employer.
 - 5) When a 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.
 - 6) Workers hired under this order will be required to show evidence of the right to work in the United States.

Item 16: Wage Rates, Special Pay Information and Deductions

- a. If piece rate earnings for total hours of work at a piece-rate during a pay period do not result in average hourly earnings equal to the guaranteed minimum hourly rate, the worker will receive make-up pay to the guaranteed minimum wage rate.
- b. In New York State, the only deductions that can be taken from worker pay are:
 1. Those required by law, such as Social Security, income tax, and garnishment of wages;
 2. those that benefit workers and are authorized in writing, such as life insurance, or a savings account

Any other deductions are illegal. This includes deductions:

 - (or deposits) for tools, boots, raincoats, or uniforms necessary for the job
 - As fines or penalties for being late, misconduct or quitting without giving notice
 - For cash shortages
 - For spoilage or breakage; or

- For damages or losses of any kind.
- c. The employer guarantees to offer employment for a minimum of $\frac{3}{4}$ ("three fourths guarantee") of the hours in the workdays during the period of the contract, and all extensions thereof. 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. In Act of God terminations, the $\frac{3}{4}$ guarantee period ends on the date of termination. Workers will not be required to work more than the number of hours specified in the job order for a workday or 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. Workers who are terminated for cause or who voluntarily abandon their job are not entitled to this guarantee if employer provides timely notification to the NPC and DHS.
- d. 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.

Item 17: Transportation

- a. Employer agrees to reimburse inbound transportation and subsistence expenses (~~per day minimum~~ ^(\$10.64 per day for a maximum of \$46)) 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.
- b. 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, from place of employment to place of recruitment, except if the worker is not returning to his place of recruitment and had subsequent employment with an employer who will bear transportation expenses, in which case this employer only pays for the transportation to the next job.
- c. Employer will not be responsible for providing return cost of transportation and subsistence from place of employment to place of recruitment if the worker voluntarily abandons the job or is terminated for cause and employer provides timely notification to the NPC and DHS.
- d. The amount of the transportation payment will be equal to the most economical and reasonable similar common carrier transportation charges for the distance involved. All transportation provided by the employer will be by common carrier or 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. The amount of daily subsistence will be in accordance with current rates published in the *Federal Register* (for workers with and without receipts).
- e. 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.

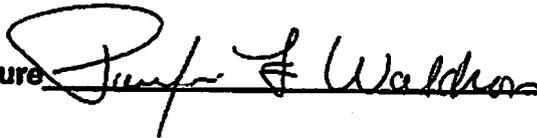
Item 21: Tools and Equipment

The employer will furnish without cost all tools, supplies, or equipment required in the performance of work.

B: OTHER CLARIFICATIONS AND ASSURANCES

1. The employer agrees to abide by the regulations at 20 CFR 653.501 and 20 CFR 655.103.¹³⁵
2. The employer will expeditiously notify the State agency by telephone immediately upon learning that a crop is maturing earlier or later, or that weather conditions, over-recruitment, or other factors have changed the terms and conditions of employment.
3. Outreach workers shall have reasonable access to the worker in the conduct of outreach activities pursuant to 20 CFR 653.501(xvi).
4. Where appropriate, the employer is certified in the use and application of pesticides per Federal Environmental Protection Agency and State Department of Environmental Conservation requirements. The employer assures that workers hired under this order who will be handling pesticides will be provided appropriate training.
5. A copy of the contract or this Job Clearance Order will be provided to the worker by the employer no later than on the day the work commences.
6. The employer assures that if acting as a farm labor contractor (FLC) or farm labor contractor employee (FLCE) on the order, he has a valid federal FLC certificate or FLCE identification card.
7. The applicant assures that he/she complies with NYS registration requirements. Farm labor contractors anticipating employment contracting with growers or processors in New York State, growers or processors in New York State who use the services of a farm labor contractor, and growers or processors in New York State who, without using the services of a farm labor contractor, are responsible for bringing into the state five or more out-of-state migrant farm or food processing workers, including H-2A workers, are required to register with the New York State Department of Labor and pay a registration fee in addition to any other fees that may be applicable.

Employer Signature

A handwritten signature in black ink, appearing to read "Joseph F. Waldman", is written over a solid horizontal line.

New York State Department of Labor
Form ETA 790 Attachment #2 - Additional Information

Item 1:

Employer Email: CCarstar@mhcable.com
Employer Fax: 518-678-9087

Item 13: Board Arrangements

Employer will will not provide three meals per day and will deduct \$ ~~1~~ ^{1.50} per day. Employer will will not furnish free dishes, cooking utensils and convenient kitchen and cooking facilities.
Employer will will not provide transportation to assure workers access to stores where they can purchase groceries and/or other incidentals and/or medical necessities

Item 15: Job Specifications

The employer will provide ~~0~~ ¹ days of training and/or allow ~~0~~ ¹ days of work for worker to reach production standards if applicable.

~~Production Standards~~ (if applicable): After ~~completion of training or break in period~~, employer will expect worker to:

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

When a worker is terminated under any of the provisions (in Att #1 Item 15B) or if the worker voluntarily terminates his employment , the employer shall not be liable for the three-fourths guarantee.

Item 16: Wage Rates, Special Pay Information and Deductions

Workers will not be covered by disability benefits.

Work performed under this order will not be covered by unemployment insurance.

The employer will not pay overtime.

The employer will provide workers referred through the interstate clearance system ~~40~~ ⁴⁰ hours of work for the week beginning with the anticipated date of need, unless employer has amended the date of need by notifying the State agency no later than 10 business days before the date of need. If the employer fails to notify NYS Department of Labor office, then employer shall pay an eligible worker referred through the clearance system \$40~~0~~.⁴⁰ for the first week starting with the originally anticipated date of need. If worker referred fails to notify the NYS Department of Labor of continued interest in the job at least 5 days before date of need, worker will be disqualified from this assurance. Employer will will not require worker to perform alternative work if the guarantee cited in this section is invoked.
Alternative work:

Employer will maintain adequate payroll records. Workers will be paid weekly on *Fri* for work through the previous *Thursday*.

20CFR 655.120(a)

The employer will offer, advertise in its recruitment and pay a wage that is the highest of the AWER, the prevailing hourly wage or piece rate, the agreed upon collective bargaining wage, or the Federal or State minimum wage, except where a special procedure is approved for an occupation or specific class of agricultural employment. Employer assures that if a change in the AWER requires an increase such increase will be paid as of the effective date of the increase. Also if the AWER is decreased this will become the wage effective of the date of the decrease.

Item 20: Workers' Compensation

The employer assures that Policy # *W-55855* issued by *OAI Workers Comp* provides the required insurance for injuries arising out of and in the course of employment.

Employer's proof of insurance coverage will be provided to the Chicago Processing Center before certification is granted.