UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE								
Case No.	Date Filed							
07-RC-260999	5-29-2020							

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer Crowne Plaza Detroit 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2 Washington Blvd., Detroit, MI 48226 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) John Sabbagh, General Manager same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. F-Mail Address 313-965-0200 313-965-4557 gm@cpdetroit.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Hotel Detroit, MI 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All full-time and regular part-time employees in the food and beverage department, housekeeping department, and hotel operations; 6b. Do a substantial number (30% or more) of the employees in the Excluded: sales employees, maintenance and engineering employees, office clerical employees, guards and supervisors as defined in unit wish to be represented by the Petitioner? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None 8c. Tel No. 8d Cell No. 8f. E-Mail Address 8e. Fax No. 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None known 10a Name 10b Address 10c Tel No. 10d Cell No. 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): June 15, 2020 12s. Full Name of Petitioner (Including local name and number) 12b. Address (street and number, city, state, and ZIP code) **UNITEHERE!** Local 24 300 River Place Drive, Suite 2700, Detroit, MI 48207 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) UNITEHERE! 12d Tel No. 12e Cell No. 12f Fax No. 12g. E-Mail Address 313 259-8480 313 259-8481 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) Amy Bachelder 333 W Fort Suite 1400, Detroit, MI 48226 13f. E-Mail Address 13d. Cell No. 13e. Fax No. 13c. Tel No. 313 496-9408 248 224-4600 313 965-4602 abachelder@michlabor.legal I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Vice-President Date May 28, 2020 Joe Daugherty

WILLFUL FALSE STATEMENTS ON THIS FETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the Information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2005). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE						
Case No. 07-RC-261060	Date Filed May 29, 2020					

	12: N	11ess e-Hiled us	ing the Agend	cy's website, w	ww.nirb.gov, submit a	nn original of this	Petit	ion to ar	NLRB office in the Region			
INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nlrb.gov</u> , submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate												
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with the NLRB and should <u>not</u> be served on the employer or any other party.												
bargaining by	Petition	er and Petitioner de	esires to be certif	ied as representat		Petitioner alleges th	nat the	following	circumstances exist and			
requests that the National Labor Relations Board proceed under its proper authority oursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)												
The Siren Ho					Broadway St, Detro			, , , , ,	,			
3a. Employer Re	prese	ntative Name and	Title		3b. Address (If same as	2b state same)						
Nick Knight, General Manager			same									
3c. Tel No. 3d. Cell No.			*	3e. Fax No.		3f. E-Mail Address						
(313) 515-0201							nick(nick@thesirenhotel.com				
	olishme	nt (Factory, mine, v	vholesaler, etc.)	4b. Principal pro	oduct or service			5a. City and State where unit is located:				
Hotel				Hotel		20 1/201 0 5		Detroit,				
5b. Description Included: All fu	of Unit II-time a	Involved nd regular part-time em	ployees in the food	and beverage depart	ment, housekeeping department	, and hotel operations;			6a. No. of Employees in Unit:			
meraded.									6b. Do a substantial number (30%			
Excluded: sale	s empl	ovees, maintenand	e and engineeri	na emplovees, off	ice clerical employees, gua	ards and supervisors	s as de	fined in	or more) of the employees in the unit wish to be represented by the			
the		,			, , , , , ,				Petitioner? Yes No			
Check One:		7a. Request for re	cognition as Bar	gaining Represent	ative was made on (Date)	an	nd Empl	lover decli	ned recognition on or about			
	屵		-	(If no reply receive								
	Щ	7b. Petitioner s c	urrent y recognize	ed as Bargaining F	Representative and desires	certification under the	e Act.					
8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address None												
8c. Tel No.			8d Cell No.		8e. Fax No.	8f. E-Mail Add		Mail Addr	ess			
							0.5					
8g. Affiliation, if any			8h. Date of Recognition or Certification		Si. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)							
9. Is there now a	strike (or picketing at the E	mplover's establi	shment(s) involved	d? No If so, approx	imately how many er	mploye	es are par	ticipating?			
				9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of tabor organization) has picketed the Employer since (Month, Day, Year)								
	s or ind	10 Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals										
known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)												
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