

**NECA WEST**  
**Workers' Compensation**  
**Alternative Dispute Resolution Program**  
**Memorandum of Understanding**

Updated February 2026

In signing this Memorandum of Understanding ("MOU"), the undersigned firm ("Undersigned") hereby agrees to be bound by all the terms and provisions of the Agreement on Workers' Compensation Dispute Resolution Procedure (hereinafter the "Workers' Compensation Agreement" or "ADR Program") between District 9 of the National Electrical Contractors Association and the 9th District of the International Brotherhood of Electrical Workers including the Rules and Regulations adopted pursuant thereto. The Undersigned is responsible to provide a copy of this MOU to its insurer listed below ("Insurer") regarding the terms and provisions of the ADR Program.

The Insurer, by providing insurance to the Undersigned, acknowledges receipt of this MOU, and agrees to its terms. The Undersigned also agrees to be bound by the terms of the NECA/IBEW Workers' Compensation Trust Agreement, and desires to participate in the ADR Program and agrees to contribute funds for the support of the administration of the ADR Program as required by the Participation Agreement.

Accordingly:

The Undersigned agrees to pay the Fee set forth in that certain "Participation Agreement" between the Undersigned the NECA/IBEW Trust. Payment will be made quarterly and calculated in advance based on either the Declarations page, Information page of the firm's Workers' Compensation policy or renewal proposal, whichever is available at the beginning of the billing cycle (policy year). If the amount due is based on a renewal notice, then the Undersigned agrees to provide the Declarations page as soon as it is available.

The Undersigned attests and understands that it shall be entitled to participate in the ADR Program only if it is a member in good standing in a California Chapter of NECA and is a signatory participant of the Participation Agreement (as amended), which is incorporated into this MOU, and evidenced by execution of this MOU. The person or entity named below hereby verifies current membership in the National Electrical Contractors Association.

**UNDERSIGNED / COMPANY NAME and ADDRESS** \_\_\_\_\_

By \_\_\_\_\_ Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_  
CA Contractor's License # \_\_\_\_\_

**NECA WEST**

By \_\_\_\_\_ Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

**INSURER'S NAME AND ADDRESS** \_\_\_\_\_

By \_\_\_\_\_ Name/Title \_\_\_\_\_ Date: \_\_\_\_\_