

**VARIATION OF BASIC
CONDITIONS OF
EMPLOYMENT**

**In terms of the
Basic Conditions of
Employment Act, 1997
Section 49**

READ THIS FIRST

B

**WHAT IS THE PURPOSE
OF THIS FORM?**

This form is an application for a variation to replace or exclude certain provisions of the BCEA.

**WHO FILLS IN THIS
FORM?**

The employer.

**WHERE DOES THIS FORM
GO?**

The General Secretary:
PO Box 61418
Marshalltown. 2107
Fax: 011 833 0921 / 011 838 5565
Email: nbcci@bullion.org.za

INSTRUCTIONS

- The sections of the BCEA for which variation is sought must be mentioned.
- Proof of any consent to the application by the registered trade union(s) must be attached to this form.
- If no consent is obtained, proof of service on registered trade union(s) and proof of reasonable steps to bring the application to the notice of employees must be attached.
- Shift roster must be included if applicable.

Additional information required:

- Reasons for not being able to comply with prescribed conditions.

**NATIONAL BARGAINING COUNCIL FOR THE
CHEMICAL INDUSTRY
(NBCCI)**

APPLICATION FOR VARIATION

A. Employer particulars

1. Name of employer

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2. Correspondence address

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Postal code **Province**

Tel. No. () **Fax. No.** ()

E-mail

3. Nature of business conducted

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4. Contact person(s)

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B. Details of application

1. Variation is applied for in respect of the following section(s) of the BCEA:

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NOTE

An official from the National Bargaining Council for the Chemical Industry may conduct an inspection to verify the information or seek more information in relation to your application.

If there is insufficient space on the form use separate piece of paper.

2. Area for which variation is sought:

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3. Period for which variation is sought:

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4. Total number of employees employed by the applicant:

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5. Total number of employees affected by this application:

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6. Condition(s) for which a variation is sought:

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7. Motivation as to why the application for variation should be granted:

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C. Prerequisites

1. **If this application has the consent of all the registered trade union(s) that represent the employees in respect of whom the variation is to apply, proof of that consent should be attached to this form.**
2. **In the absence of the consent referred to in 1, proof of service of a copy of this application on all registered trade unions that represent employees affected by this application must be attached.**
3. **If the majority of employees are not represented by a registered trade union, proof of reasonable steps taken to bring this application to the attention of affected employees must be attached.**
4. **If no agreement could be reached with the parties referred to in 1, 2 or 3 – points of dissension**

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It is hereby certified that the information contained in this application is correct.

Signatures on behalf of the Employer parties:

Name:	Signature:	Position:	Date:
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Signatures on behalf of the Trade Union parties:

Name:	Signature:	Union:	Date:
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