Date:	
Attention:	
Station:	
Re: Article 50 Route Verification As you are aware, Article 50 of the colle be reassessed and corrected:	ective agreement provides a process by which a workload may
the prescribed hours of duty or a means of establishing whet	vee is not completing his or her assignments within n a regular basis, the LCRMS is to be used solely as ther the source of the problem is related to the normal conditions as opposed to evaluating the nment.
An employee who is able to de written request for verification. within three (3) months of this p	emonstrate the workload is excessive may submit a . The Corporation shall perform a route verification request.
In accordance with Article 50 of the coll verification of my schedule.	lective agreement, please accept this letter as my request for a

It would be greatly appreciated if you could provide your confirmation that such arrangements will be made.

Name:	

HRID: \_\_\_\_\_

Route: \_\_\_\_\_