BRICKLAYERS AND ALLIED CRAFTSMEN LOCAL 7 PENSION FUND

APPLICATION TO THE PENSION BENEFIT GUARANTY CORPORATION FOR A PARTITION ORDER

EXHIBIT 3A

BRICKLAYERS & ALLIED CRAFTSMEN LOCAL No. 7 PENSION PLAN

33 Fitch Boulevard Austintown, Ohio 44515 Phone: 330/270-0453 Toll free: 800/435-2388

Dear Pension Benefit Guaranty Corporation:

I am signing this application on behalf of the plan sponsor, the Board of Trustees of the Bricklayers and Allied Craftsmen Local 7 Pension Fund. I am a current member of the Board of Trustees of the Bricklayers and Allied Craftsmen Local 7 Pension Fund.

The plan sponsor acknowledges that during any time in which this application is pending final action by the PBGC, the plan sponsor must promptly notify PBGC in writing of any material fact or representation contained in or relating to the application, or in any supporting documents, that is no longer accurate, or any material fact or representation omitted from the application or supporting documents, that the plan sponsor discovers.

Under penalties of perjury, I declare that I have examined this application, including accompanying documents, and, to the best of my knowledge and belief, the application contains all the relevant facts relating to the application, and such facts are true, correct, and complete.

Sincerely,

Signed:

Print Name:

Authorized Trustee of Board of Trustees