



Illinois Fertilizer & Chemical Association

14171 Carole Drive, Bloomington, IL 61705 • PH: (309) 827-2774 • Fax: (309) 827-2779 • www.ifca.com

March 20, 2023

Illinois Department of Labor
Fair Labor Standards Division
Compliance Processing Section
160 North LaSalle, Suite C-1300
Chicago, IL 60601-3150

To Whom It May Concern:

The Illinois Fertilizer and Chemical Association is writing to request a general emergency permit exemption for employees of ag retailers engaged in applying fertilizer and crop protection products to fields and transportation of those products to farmers fields throughout the State of Illinois from 820 ILCS 140/2, commonly referred to as the One Day Rest In Seven Act. We are requesting this exemption cover the period from April 15 through June 15, 2023. Since spring planting starts at various times throughout the State of Illinois, we are requesting a time period covering eight weeks.

This exemption covers the ag input industry in Illinois which consists of more than 150 firms with approximately 850 facilities. It is understood that all work must be on a voluntary basis and the employee cannot be forced to work on the designated day of rest. Also, this exemption does not apply to firms with union contracts.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kevin Johnson', with a horizontal line extending to the right.

Kevin "KJ" Johnson
President
Illinois Fertilizer and Chemical Association

Representing the Agricultural Input Industry

ATTACHMENTS

Company Name *

Illinois Fertilizer and Chemical Association

The OFFICIAL name of the company.

Reference Number

If you have previously submitted an ODRISA permit application in this calendar year and were provided a reference number, please include the reference number here.

Owner/Contact *

Kevin Johnson

Email Address *

kj@ifca.com

Business Address Line 1 *

14171 Carole Drive

(Not A PO BOX)

Business Address Line 2

City *

Bloomington

State *

IL



Business Phone ***Business Fax****Website****Total Number of Employees ***

Total number of persons employed by the company. (NUMBERS ONLY)

From (Date) *

Date the permit starts.

To (Date) *

Date the permit ends.

More than 8 weeks? *

Select YES if this permit request encompasses more than 8 weeks OR if with this permit request you would exceed 8 weeks cumulatively with other permits you have requested in the current Calendar Year. If YES you must select one of the two options below. If NO you are not required to select either option.

Check one or both of the following conditions if the permit request exceeds 8 weeks.

Increasing the number of employees or adjusting work schedules would not remedy the

Business and economic conditions make this request necessary.

Job Title/Classification 1 *

Ag Retail Workers

Please submit the anticipated number and title/skills of employees covered by this permit. If you require a permit for more than (4) titles/skills, please submit a second request.

Number of Employees (1) *

5000

NUMBERS ONLY

Job Title/Classification 2

Number of Employees (2)

Job Title/Classification 3

Number of Employees (3)

Job Title/Classification 4

Number of Employees (4)

This Constitutes My Electronic Signature *

Signed

day off as permitted by the Act (820 ILCS 140/1-9). I certify that all information provided and the statements made herein are true, correct, and complete.

Attachments

Choose Files

[IFCA Letter to Illinois Department of Labor march 20 2023.pdf](#)

Multiple files can be uploaded by holding down Shift or Ctrl while selecting.