

2006 Ferry & Terminal Operations Pay Questionnaire

Question Number: 1 2 3 4 5 6

Benchmark # /Job Title	Number of employees in Classification	Average Base Pay Rate per Hour	Base Pay Rate Range Per Hour (Min - Max)	Average hours worked per week	Normal Working Schedule	Effective Date of Current Pay Rates	Largest Vessel in Tons/Horsepower
1. Master/Pilot							Largest Vessel is _____ Tons
2. First Mate/Pilot							Largest Vessel is _____ Tons
3. Second Mate							Largest Vessel is _____ Tons
4. Staff Chief Engineer							Largest Vessel is _____ Horsepower
5. Chief Engineer							Largest Vessel is _____ Horsepower
6. Assistant Engineer							
7. Oiler							
8. Oiler-Passenger Only							
9. Wiper							
10. Able Seaman/Bos'n							
11. Able Seaman (AB)							
12. Ordinary Seaman (OS)							
13. Terminal Supervisor							
14. Ticket Seller (Auto)							
15. Ticket Seller (Passenger)							
16. Ticket Taker							
17. Terminal Attendant							
18. Information Agent							
19. Shoregang Worker							
20. Operations Watch Supervisor							

PREMIUM PAY AND BENEFITS QUESTIONNAIRE
Ferry and Terminal Operations

8. **Life Insurance:**
Employer contributes ____% of gross pay OR \$ ____ per month
9. **Retirement Benefits (including pension, profit sharing, 401(k), IRA, other qualified plans):**
Employer contributes ____% of gross pay OR \$ ____ per month
10. **Uniforms:** Does the employer require that employees wear uniforms?
o No o Yes
- If yes, are the uniforms provided by the employer?
o No o Yes
- If not provided, is there a uniform allowance paid?
o No o Yes
- Are uniforms cleaned by employer?
o No o Yes
- Does the employer pay a cleaning allowance?
o No o Yes
11. **Meals:** Does the employer discount meals for employees?
o No o Yes. The meal discount is _____
12. **Training/Education:** Does the employer reimburse employees who take part in pre-approved, job or trade-related training, educational or apprenticeship programs?
o No o Yes. The rate of reimbursement is _____
- Does the employer require a minimum term of employment before making such programs available?
o No o Yes. The minimum term required is _____
- Does the employer pay wages for time the employee attends such programs?
o No o Yes. The employee is paid at the rate of _____
13. **Medical Exams/Licensure:** Does the employer reimburse the cost of medical examinations necessary for licensure?
o No o yes. Reimbursement is at the rate of _____
14. **Travel:** Are employer-directed travel time and expenses compensated?
o No o Yes
- If so, at what rate?
Travel Time _____
Mileage _____
Meals & Lodging _____

PREMIUM PAY AND BENEFITS QUESTIONNAIRE
Ferry and Terminal Operations

14. **Travel (continued)**

Are employees reimbursed for travel time and expenses if assigned to other than their regular or home/relieving terminal?

No Yes

If so, at what rate?

Travel Time _____

Mileage _____

Meals & Lodging _____

15. **Passes:** Does the employer provide travel passes for employees?

No

Yes

For employee's: Spouse Dependents

Is there a minimum term of employment which must be worked to earn a pass?

No Yes. The minimum term is _____

16. Are there **any other premium pay and/or benefits** paid?

Please describe here:

PREMIUM PAY AND BENEFITS QUESTIONNAIRE
Shipyard Trades

Responses to questions 1 - 16 apply to Benchmark number: (Please enter all benchmark #'s in the box that apply to this data.)

1. **Premium Pay:** What extra pay is earned by workers in the job groups indicated for the following work?

- a. Overtime work performed immediately preceding or following a regular shift: _____% of base pay.
- b. Work assignments on Saturday: _____% of base pay.
- c. Work assignments on Sunday: _____% of base pay.
- d. Work assignments on paid holidays: _____% of base pay.
- e. Number of paid holidays per year: _____
- f. Overtime worked on paid holidays: _____% of base pay.
 - o is paid in hourly increments.
 - o is paid in some other increments. Please describe below.

- g. Swing shift differential: _____
Graveyard shift differential: _____
Other premium or shift differential: _____

- h. Work assignments involving dirty or obnoxious materials: ____% of base pay.
Paid for entire shift? ____No ____Yes
Paid for actual hours with dirty materials? ____No ____Yes

- i. Work assignments involving hazardous materials or situations: ____% of base pay.
Paid for entire shift? ____No ____Yes
Paid for actual hours of hazard? ____No ____Yes

2. **Vacation (Company provides X hours of paid vacation after X years of service):**

Attach

contract provision or policy if more convenient.

- | | |
|-------------------------------|-------------------------------|
| _____ hours after _____ years | _____ hours after _____ years |
| _____ hours after _____ years | _____ hours after _____ years |
| _____ hours after _____ years | _____ hours after _____ years |

3. **Sick Leave:**

Number of paid sick leave hours per year _____

4. **Medical Insurance (Health & Welfare) - Employer contribution:**

For employee only \$_____ per month

For employee with spouse and two children \$_____ per month

5. **Dental Insurance - Employer contribution:**

For employee only \$_____ per month

For employee with spouse and two children \$_____ per month

6. **Vision Care Insurance - Employer contribution:**

For employee only \$_____ per month

For employee with spouse and two children \$_____ per month

7. **Long Term Disability Insurance:**

Employer contributes _____% of gross pay OR \$ _____ per month

8. **Life Insurance:**

Employer contributes _____% of gross pay OR \$ _____ per month

9. **Retirement Benefits (including pension, profit sharing, 401(k), IRA, other qualified plans):**

Employer contributes _____% of gross pay OR \$ _____ per month

10. **Work Clothes:** Does the employer require that certain uniform apparel be worn by employees?

No

Yes. Work and/or safety apparel is provided by company.

Yes. Work and/or safety apparel allowance of _____ per _____ is paid.

Does the company pay a cleaning allowance?

No

Yes. The allowance is _____ per _____

11. **Meals:** Does the company discount meals for employees?

No

Yes. Meals are discounted at the rate of _____%.

12. **Training/Education:** Does the employer reimburse employees who take part in pre-approved, job or trade-related training, educational or apprenticeship programs?

No

Yes. The rate of reimbursement is _____

Does the employer require a minimum term of employment before making such programs available?

No

Yes. The minimum term required is _____

Does the employer pay wages for time the employee attends such programs?

No

Yes. The employee is paid at the rate of _____

13. **Travel:** Are employer-directed travel time and expenses compensated?

No

Yes

If so, at what rate?

Travel Time _____
Mileage _____
Meals & Lodging _____

Are employees reimbursed for travel time and expenses if assigned to other than their regular duty station?

No Yes

If so, at what rate?

Travel Time _____
Mileage _____
Meals & Lodging _____

Shipyard Trades

14. **Passes:** Does the employer provide travel passes for employees?

No

Yes

For employee's: Spouse Dependents

Is there a minimum term of employment which must be worked to earn a pass?

No Yes. The minimum term is _____

15. Are there **any other premium pay and/or benefits** paid?

Please describe here:

2006 Administration – Office and Terminal Pay Questionnaire

Question Number: 1 2 3 4 5

Benchmark # /Job Title	Number of employees in Classification	Average Base Pay Rate per Month	Base Pay Rate Range per Month Min & Max	Average hours worked per week	Effective date of current pay rates
201. Accountant					
202. Accounting Assistant 2					
203. Accounting Assistant 3					
204. Buyer 2					
205. Buyer 3					
206. Contracts Coordinator 1					
207. Contracts Coordinator 2					
208. Crew Dispatch Coordinator					
209. Crew Dispatcher					
210. Customer Information Assistant					
211. Data Entry Clerk					
212. Inventory Agent					
213. Mail/Stock Clerk					
214. Maintenance Materials Coordinator					
215. Office Assistant 1					
216. Payroll Assistant 1					
217. Payroll Assistant 2					
218. Payroll Assistant 3/Claims					
219. Payroll Coordinator					

2006 Administration – Office and Terminal Pay Questionnaire

Question Number: 1 2 3 4 5

Benchmark # /Job Title	Number of employees in Classification	Average Base Pay Rate per Month	Base Pay Rate Range per Month Min & Max	Average hours worked per week	Effective date of current pay rates
220. Personnel Assistant 1					
221. Personnel Assistant 2					
222. Purchasing Agent					
223. Purchasing Assistant					
224. Receptionist					
225. Secretary					
226. Security Staff Assistant					
227. Staff Aide					
228. Word Processing Specialist					
229. Custodian (Janitor)					
230. Custodial Supervisor					

PREMIUM PAY AND BENEFITS QUESTIONNAIRE
Administration – Office and Terminal

Responses to questions 1 - 16 apply to Benchmark number: (Please enter all benchmark #'s in the box that apply to this data.)

1. **Premium Pay:** What extra pay is earned by workers in the job groups for the following work?
- a. Overtime work performed immediately preceding or following a regular shift: _____% of base pay.
 - b. Work assignments on Saturday: _____% of base pay.
 - c. Work assignments on Sunday: _____% of base pay.
 - d. Work assignments on paid holidays: _____% of base pay.
 - e. Number of paid holidays per year: _____
 - f. Overtime worked on paid holidays: _____% of base pay.
 - o is paid in hourly increments.
 - o is paid in some other increments. Please describe below.

2. **Vacation (Company provides X hours of paid vacation after X years of service):**
Attach contract provision or policy if more convenient.
- | | |
|-------------------------------|-------------------------------|
| _____ hours after _____ years | _____ hours after _____ years |
| _____ hours after _____ years | _____ hours after _____ years |
| _____ hours after _____ years | _____ hours after _____ years |

3. **Sick Leave:**
Number of paid sick leave hours per year _____

4. **Medical Insurance (Health & Welfare) - Employer contribution:**
For employee only \$_____ per month
For employee with spouse and two children \$_____ per month

5. **Dental Insurance - Employer contribution:**
For employee only \$_____ per month
For employee with spouse and two children \$_____ per month

6. **Vision Care Insurance - Employer contribution:**
For employee only \$_____ per month
For employee with spouse and two children \$_____ per month

7. **Long Term Disability Insurance:**
Employer contributes _____% of gross pay OR \$_____ per month

8. **Life Insurance:**
Employer contributes ____% of gross pay OR \$ ____ per month
9. **Retirement Benefits (including pension, profit sharing, 401(k), IRA, other qualified plans):**
Employer contributes ____% of gross pay OR \$ ____ per month
10. **Work Clothes:** Does the employer require that certain uniform apparel be work by employees?
 No Yes

If yes, is the work apparel provided?
 No Yes

11. **Training/Education:** Does the employer reimburse employees who take part in pre-approved, job or trade-related training, educational or apprenticeship programs?
 No Yes. The rate of reimbursement is _____

Does the employer require a minimum term of employment before making such programs available?
 No Yes. The minimum term required is _____

Does the employer pay wages for time the employee attends such programs?
 No Yes. The employee is paid at the rate of _____

12. **Travel:** Are employer-directed travel time and expenses compensated?
 No Yes
If so, at what rate?
Travel Time _____
Mileage _____
Meals & Lodging _____

Are employees reimbursed for travel time and expenses if assigned to other than their regular or home/relieving terminal?
 No Yes

If so, at what rate?
Travel Time _____
Mileage _____
Meals & Lodging _____

PREMIUM PAY AND BENEFITS QUESTIONNAIRE
Administration – Office Sound Region

13. **Passes:** Does the employer provide travel passes for employees?

- No
- Yes

For employee's: Spouse Dependents

Is there a minimum term of employment which must be worked to earn a pass?

- No
- Yes. The minimum term is _____

14. Are there **any other premium pay and/or benefits** paid?

Please describe here: