



# MAINE RURAL WATER ASSOCIATION

## 2017 JOINT FACILITY WAGE, SALARY AND BENEFITS SURVEY

### XI. Insurance & Retirement for Full Time Employees

Please fill in this section only for lines on which you have selected YES. If you have selected NO, please leave blank.

Does Your Facility Offer? Please check YES or NO			Employer Pays What % of Individual Coverage?		Employer Pays What % of Family Coverage?
Health Insurance	<u>YES</u>	<u>NO</u>	_____ %		_____ %
Dental Insurance	<u>YES</u>	<u>NO</u>	_____ %		_____ %
Long Term Disability	<u>YES</u>	<u>NO</u>	Employer Contribution	_____ %	
Short Term Disability	<u>YES</u>	<u>NO</u>	Employer Contribution	_____ %	
Retirement Plan	<u>YES</u>	<u>NO</u>	Employer Contribution	_____ % of yearly pay	
			or dollar amount: \$	_____	
Kind of Retirement Plan (s) Offered (check plans):			401a	401k	457
			Maine State Retirement		
			Other: _____	Other: _____	
Life Insurance	<u>YES</u>	<u>NO</u>	Employer Contribution	_____ %	\$ _____ Payout

### XII. Trustees: This Section is only for Districts or Private Companies:

(Please leave blank if you are a Municipal Department or Division)

Number of Trustees	_____		Elected		<i>check one</i>
			Appointed		
Method of Payment	Per Meeting	\$ _____	Other	\$ _____	
	Annual Stipend	\$ _____			
Additional Payment for Special Meeting(s)	<u>YES</u>	<u>NO</u>	If Yes,	\$ _____	

**MAINE RURAL WATER ASSOCIATION**  
**2017 WATER FACILITY WAGE, SALARY AND BENEFITS SURVEY**

**XIII. Salary Information (Please see FAQ Sheet for answers to questions about this page):**

**Contract Out Operations?**  
 If yes, please check off all positions that are outsourced, along with salaries if known

**Number of Full Time Employees:**

**Number of Part Time Employees:**

JOB TITLE	Contract Out? If yes, please check Box	Salaried Employee (Check Box)	Hourly Employee (Check Box)	Average Hours per Week *	Current Wage Salary/per hr	% of Last Increase	Level of Certification Required	Years in this Position
GM/Superintendent								
Assistant GM/Superintendent								
Chief Operator								
Operator								
Foreman								
Laborer								
Equipment Operator								
Maintenance Tech								
Lab Manager								
Lab Tech								
Office Manager								
Billing Clerk/Admin Assistant								
Meter Reader								
Other (Please fill in Title)								

**\* Please fill in the Average Hours per Week Column for both Salaried and Hourly Employees**

**MAINE RURAL WATER ASSOCIATION**

**2017 WASTEWATER FACILITY WAGE, SALARY AND BENEFITS SURVEY**

**XIV. Salary Information (Please see FAQ Sheet for answers to questions about this page):**

**Contract Out Operations?**

If Yes, please check off all positions that are outsourced, along with salaries if known

**Number of Full Time Employees:**

**Number of Part Time Employees:**

<b>JOB TITLE</b>	<b>Contract Out? If yes, please check Box</b>	<b>Salaried Employee (Check Box)</b>	<b>Hourly Employee (Check Box)</b>	<b>Average Hours per Week *</b>	<b>Current Wage Salary/per hr</b>	<b>% of Last Increase</b>	<b>Level of Certification Required</b>	<b>Years in this Position</b>
GM/Superintendent								
Assistant GM/Superintendent								
Chief Operator								
Operator								
Foreman								
Laborer								
Equipment Operator								
Maintenance Tech								
Lab Manager								
Lab Tech								
Office Manager								
Billing Clerk/Admin Assistant								
Other (Please fill in)								
Other (Please fill in Title)								

**\* Please fill in the Average Hours per Week Column for both Salaried and Hourly Employees**

**MAINE RURAL WATER ASSOCIATION**

**2017 JOINT FACILITY WAGE, SALARY AND BENEFITS SURVEY**

**Small Joint Utility**

XV. Salary Information (Please see FAQ Sheet below for answers to questions about the salary pages):

If you need additional job titles, please copy in any of the titles from enclosed Job Description page.

JOB TITLE	Contract Ops? (check if yes)	Water and/or Wastewater (Please Specify)	Salaried Employee (Check Box)	Hourly Employee (Check Box)	Average Hours per Week *	Current Wage Salary/Per Hr	% of Last Increase	Level of Certification Required	Years in this Position
GM/Superintendent									
Operator									
Laborer									
Office Manager									
Billing Clerk									
Other									

\* Please fill in the Average Hours per Week Column for both Salaried and Hourly Employees

**MAINE RURAL WATER ASSOCIATION**  
**2017 JOINT FACILITY WAGE, SALARY AND BENEFITS SURVEY**

IF YES

**XVI. On-Call: This Section is for Hourly and Salaried Employees:**

Are hourly employees paid for being on-call?	<u>YES</u>	<u>NO</u>	
If YES, what is the number of hours paid just for being on-call (e.g. hrs./wk.)?			_____
Are hourly employees paid a minimum number of hours per call-in?	<u>YES</u>	<u>NO</u>	
If YES, what is the minimum number of hours paid for each call-in?			_____
Are salaried employees paid for being on-call?	<u>YES</u>	<u>NO</u>	
If YES, what is the number of hours paid just for being on-call (e.g. hrs./wk.)?			_____
Are salaried employees paid a minimum number of hours per call-in?	<u>YES</u>	<u>NO</u>	
If YES, what is the minimum number of hours paid for each call-in?			_____
Are company vehicles provided for travel to home while on-call?	<u>YES</u>	<u>NO</u>	
Is mileage paid for on-call travel in lieu of taking a company vehicle?	<u>YES</u>	<u>NO</u>	
If YES, what is the maximum mileage allowed for on-call travel?			_____

**XVII. Additional Comments**