

**ATTACHMENT A**



**Airport Business Name:** (Type Your Business Name Here)

**Airport Living Wage Ordinance Workforce Statement and Health Insurance Verification  
Documentation for Annual Report (Due to Airport Finance & Administration Division by Jan. 31)**

Definition of a covered employee: 1) Does not provide volunteer services that are uncompensated except for reimbursement of expenses such as meals, parking, transportation;  
2) Expend at least 1/2 of his/her time working on Airport business or work at the Airport;  
3) Is at least 18 years.

FT Employee: 2,080 hours per year (173.33 hours per month)

Our company offers health insurance benefits:	0	Back-up documentation is required, i.e., Insurance company statement w/employee names and descriptions of enrolled plans.
Waiting period for new hire eligiblity into health insurance?	0	
Our company offers retirement benefits:	0	Back-up documentation is required, i.e., retirement plan documentation w/employee names and current status.
Waiting period for new hire eligiblity into retirement benefit?	0	
Employees are Represented by a Collective Bargaining Agreement:	0	Copy of CBA is required.

Hourly Employee Compensation Documentation								
Last Name	First Name	Job Title	Date of Hire	Date Terminated (if applicable)	<u>Basic Hourly Pay Rate</u>	<u>Employer Hourly Contribution to Health Benefit (medical/vision/dental)</u>	<u>Employer Hourly Contribution to Employee Retirement Benefit (pension, profit sharing, 401(k))</u>	<u>Covered Employee Total Hourly Pay Rate (Must be at least \$14.53 with health or \$15.78 without)</u>







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