

2008 Mid-size Construction Benefits and Pay Practices

Data Due: August 15, 2008
Results Published: November 15,
2008

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2008 Mid-size Construction Benefits & Pay Practices Survey

You are invited to participate in our 2008 Benefits & Pay Practices Survey. This survey is specifically geared to full time (non-craft) employees of Construction organizations.

Company Size/Principal Business Activities

Fiscal Year Most Recent Revenue \$ _____
(Please enter whole numbers. Do not round.)

Total Number of Salaried Employees _____

Contact Information

Who should be contacted to answer questions about your survey responses?

Company: _____

Contact: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

E-Mail: _____

The survey will be sent to the above contact unless otherwise indicated below.

Contact: _____

Address: _____

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Phone: _____

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Please return your survey results by **August 15, 2008** to:

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Phoenix, Arizona 85018
Phone: 602-381-8108
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2008 Mid-size Construction Benefits & Pay Practices Survey

Explanation of terms

9/80:

Schedule in which different employees have alternate Fridays off.

Area Uplifts:

A pay differential percentage for accepting an assignment in a region with a higher cost of living vs. the home office or hire location.

Comp Time:

Compensatory time off for exempt employees who are required to work on a paid holiday or weekend due to job schedules (FLSA prohibits for non-exempt employees).

Four Day/Forty Hour:

Any combination of schedules that provides a four-day workweek.

IRS Section 125:

Section 125 of the Internal Revenue Code allows companies to give employees the opportunity to pay for benefits on a pre-tax basis. The most common alternatives are Premium Only Plans, Flexible Spending Accounts (FSA) and Cafeteria Plans.

Long-Term Disability:

A long-term medical condition typically lasting 6 months or more which makes an employee unable to perform his/her job.

Reduced Workweek:

Other combinations which allow for time off with full benefits for less than forty hours.

Short-Term Disability:

A medical condition that lasts for a period of time, usually less than 6 months, which makes an employee unable to perform his/her job.

2008 Mid-size Construction Benefits & Pay Practices Survey

PART I – BENEFITS

◆ Paid Time Off Benefits

How many paid company holidays are offered each calendar year? _____ Days

How many paid personal days are offered each calendar year? _____ Days

Yes No Does your company offer a combined Paid Time Off bank?

If yes, what is the accrual schedule in days?

<i>Years of Service</i>	<i>Annual Accrual</i>	<i>Comments</i>
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

If there is a separate schedule for VPs and above, please list it below:

_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

What is the maximum accrual allowed with carry over? _____ Days

Yes No Does your company offer a traditional vacation accrual plan?

If yes, what is the accrual schedule in days?

<i>Years of Service</i>	<i>Annual Accrual</i>	<i>Comments</i>
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
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If there is a separate schedule for VPs and above, please list it below:

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_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

What is the maximum accrual allowed with carry over? _____ Days

Yes No Do new hires have a minimum period of service required before PTO/vacation accrual begins?

If yes, how long? _____ Days

2008 Mid-size Construction Benefits & Pay Practices Survey

Yes No Does your company offer a traditional sick leave program?

If yes, what is the annual accrual schedule? _____

Yes No Can unused sick days be carried over to the next year?

What is the maximum number of sick days that can be carried over? _____ Days

◆ Work/Life Benefits

(Please see glossary on page 3 for asterisked terms.)

Yes No Does your company offer a Comp Time* program?

Yes No Does your company offer flexible schedules?

Yes No Reduced Workweek*?

Yes No Four day/forty* hour week or similar scheduling?

Yes No 9/80 Schedule*?

Yes No Has your company adopted a business casual dress code?

If yes: Friday Only All week

◆ Professional Development

Yes No Does your company offer educational assistance?

If yes, what percent of tuition costs are reimbursed? _____%

What is your annual maximum reimbursement? \$_____

Yes No Must course relate to job duties to be covered?

Yes No Are both full-time and part-time employees eligible?

If reimbursement depends on grade, please list percentages below:

A _____ %

B _____ %

C _____ %

D or Below _____ %

Yes No Does your company offer training in support of Professional Development?

Yes No Does your company reimburse employees for costs to obtain a professional license?

Yes No Does your company pay for renewal costs for professional licenses and registrations?

Yes No Does your company pay for dues and membership fees related to professional societies?

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Retirement Plans

401k Plan:

Yes No Does your company offer a 401(k) plan?

Yes No Is there a company match provision?

Matching Formula: _____% of first _____% (Example: 100% of first 3%)

Any additional matching: _____

Vesting Schedule _____

When is employee eligible to contribute? _____

Yes No Does your 401(k) offer a loan provision?

Yes No Does the plan allow post tax contributions?

Other Retirement Plans:

Yes No Does your company currently offer a Pension Plan?

Yes No Does your company offer a Stock Purchase Plan?

Yes No Does your company offer an ESOP Plan?

Yes No Does your company offer a Profit Sharing Plan?

What is the formula? _____

What is the eligibility? _____

What is the vesting schedule for contributions? _____

◆ Severance Plans

Yes No Does your company have a formal severance pay plan?

Eligible employees? _____

Yes No Is a release required?

Yes No Is plan ERISA qualified?

Payment terms (i.e. flat amount, one week per year of service, etc.): _____

Maximum amount (if any): _____

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Turnover

Please only provide statistics for full-time, regular, domestic employees (no craft):

Headcount as of January 1, 2007 _____

Headcount as of December 31, 2007 _____

Provide the number of terminations during the calendar year for the following reasons (Do not include transfers or promotions):

Non-Company Directed Terminations

Retired _____

Deceased _____

Medical/LTD _____

Voluntary (quits) _____

Other: _____

Company Directed Terminations

Layoff due to project completion _____

Non-project layoff due to position elimination _____

For cause _____

Other: _____

Total Terminations _____

◆ Health and Welfare Benefits

Yes No Do you offer a Vision plan?

Yes No Do you offer a Mental Health plan? (Either included in your medical plan or as a separate plan)

Yes No Do you offer Supplemental Life Insurance?

Yes No Do you offer Long Term Care Coverage?

Yes No Do you offer Retiree Medical?

Yes No Do you offer Retiree Life Insurance?

Yes No Does medical plan include wellness features?

Yes No Does your company offer benefits to domestic partners?

Yes No If you don't offer a Health Savings Account, are you considering one?

Yes No Do you offer online benefits enrollment?

Yes No Do you reimburse employees who waive their right to medical coverage?

If yes, how much? \$_____ Per week month year

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Health and Welfare Benefits (cont'd)

Please provide average or most prevalent rates.

	***Total Monthly Premium Amount Paid to Carrier per EE		Monthly Employee Contribution		Comments
Medical Elections (complete all that apply)					
PPO	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
HMO	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
EPO	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
Traditional Major Medical (80/20 or 70/30)	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
High Deductible Health Plan (HAS/HRA)	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
Dental Elections (complete all that apply)					
DMO	EE	\$	EE	\$	Orthodontia Maximum \$ _____
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
PPO/ Indemnity	EE	\$	EE	\$	Orthodontia Maximum \$ _____
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	

***I include both employer and employee contribution

When is the employee eligible for benefits?

- Immediately
 30 Days/1st of month following hire
 90 Days
 Other

List any significant changes designed to control the costs of your medical plans since last year.

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Health and Welfare Benefits (cont'd)

Medical Plan Design

Please provide in-network costs for the following:

	PPO	HMO	EPO	High Deductible	Trad Major Medical	Comments
Annual Deductible						
Individual						
Family						
Co-Insurance (Employee Side)						
In-Network %						
Out-of-Network %						
Co-Pay						
Doctor						
Specialist						
Hospital						
Lifetime Maximum						
Out-of-Pocket Max						
Individual						
Family						
RX Retail						
Generic						
Brand						
Non-Formulary						
RX Mail						
Generic						
Brand						
Non-Formulary						
# Eligible						
# Enrolled						

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ IRS Section 125 Plans

Yes No Does your company offer Section 125* plans?

Yes No For medical/dental employee contributions

Yes No For medical spending account/FSA

Yes No For dependent care spending account/FSA

Yes No For other premium payments (Life, Disability, etc?):

Describe: _____

◆ Executive Benefits

Does your company offer Special Benefits for Executives?

Yes No Supplemental Pension

Yes No Physical Exam

Yes No Supplemental Life Insurance

Yes No 1st Class Travel

Yes No Spouse Travel

Yes No Airline Clubs

Yes No Supplemental Medical

Yes No Country Clubs

Yes No Supplemental Disability

Yes No Health Clubs

Yes No Tax Preparation Services

◆ Fringe Benefits

Yes No Legal Services

Yes No On-site Fitness Center

Yes No Transportation (bus pass, etc.)

Yes No On-site Cafeteria

Yes No Telecommuting

Yes No On-site Day Care Center

Yes No Job Sharing

Yes No Concierge

Yes No Parking

Yes No Service Awards

Yes No Employee Counseling or EAP

Yes No Matching Gift Programs

Yes No Discounts

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PART II – PAY PRACTICES

◆ Salary Increases-Merit Budget

Yes No Does the company have a formal salary increase budget? (For merit, general or both)

Yes No Company gives merit increases only

Yes No Company gives general increases only

Yes No Company gives both merit & general increases

When are salary increases granted:

Yes No Employee Anniversary Date

Yes No Fixed Date

If yes, fixed date for all increases _____
Month Day

Indicate the planned percent salary increase for past and next fiscal year:

	Average Total Salary Increase %
Current Fiscal Year (2008) Salary Increase Budget	

	Total % Salary Increase Budget
Next Fiscal Year (2009) Salary Increase Budget	

◆ College Graduate Hiring Rates

List average starting salaries paid to new graduates by degree and indicate the dollar amount average sign-on bonuses or relocation allowances. Use one line for each degree.

Degree Name	Degree Type	Salary Offer	Sign-On Bonus Amount	Relocation Bonus Amount
Civil Engineering	BS			
	MS			
Electrical Engineering	BS			
	MS			
Mechanical Engineering	BS			
	MS			
Construction Management/Bldg. Technology	BS			
	MS			

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ College Graduate Hiring Rates (cont'd)

- Yes No Does the company use formal hiring rates?
 Yes No If yes, was the previous year's rate adjusted?
- Yes No Does the company provide a formal mentor system?
- Yes No Does the company provide a formal training program?
- Yes No Does your company provide signing bonuses?

◆ Other Pay

- Yes No Do you provide sign-on bonuses for other positions?
- Yes No Do you have a per diem policy?
 If yes, what are eligibility requirements? _____

- How are amounts determined? _____

- Yes No Are they grossed up for taxes?
- Yes No Do you provide area uplifts?

If yes, which cities or regions?

<u>City/Region</u>	<u>Amount/%</u>
_____	_____
_____	_____
_____	_____
_____	_____

- Yes No Do you provide a housing allowance? (Separate from per diem)
 If yes, what are eligibility requirements? _____

- How are amounts determined? _____

- Yes No Do you provide exempt overtime?
 If yes, what are eligibility requirements? _____

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Relocation Policy

Yes No Does the company have separate relocation policies by class of employee?

If yes, how many different policies apply?

- ___ College Graduates
- ___ Other New Hires
- ___ Officers
- ___ Exempt Employees
- ___ Non-Exempt Employees

Which moving expenses are typically covered?

- ___ House hunting trips
- ___ Temporary living expenses
- ___ Movement of household goods
- ___ Movement of Vehicles
- ___ Mileage Reimbursement

Yes No Do you buy former residences?

Yes No Do you gross up expenses for taxes?

◆ Bonus/Incentive Plans

Yes No Does your company offer Bonus and Incentive Compensation Plans?

If yes, describe below:

Type of Plan	Eligibility	% of EEs eligible for plan	# Eligible	# Receiving	Basis for award
Spot Award					
Management Incentive					
Project Incentive					
Other (Describe) _____					
Other (Describe) _____					

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If you indicated a Project Incentive plan on the previous page, please respond to the following questions:

When are Project Incentives paid?

- Annually
- Upon Project Completion
- Interim Milestones (Describe: _____)
- Other (Describe: _____)

How are Project Incentives funded?

- Project Profits
- Pool of Company Funds
- Other Means (Describe: _____)

◆ Automobile/Mileage Allowance

Indicate by title if an automobile, truck or vehicle allowance is provided. Only report for positions which are included in the salary section of the Field Survey (i.e. exclude executive management positions that are reported in the Executive Salary Survey). We are only interested in determining whether the position "typically" includes a vehicle or vehicle allowance, not the number of employees. Also indicate the "cents per mile" reimbursement rate for those using company vehicles and those using personal vehicles (for company business). Use the "Other" column to describe any pertinent information about your policy (i.e., company truck for business use only, company auto for out of town use, etc.). Do not report information for executives.

Yes No Does your company offer gasoline credit cards?

Job Category	Vehicle Provided		Auto Allowance Average Amount/Month	Mileage Reimbursement for Business Use		Other (explain)
	Auto	Truck			Cents per Mile	
Project Manager or Project Executive	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Superintendent	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Engineer	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Estimator	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		

2008 Mid-size Construction Benefits & Pay Practices Survey

Are there any other benefits issues not addressed that you would like to see included in next year's survey?

If yes, describe: _____

2008 Mid-size Construction Benefits and Pay Practices

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2008 Mid-size Construction Benefits & Pay Practices Survey

PART I – BENEFITS

◆ Paid Time Off Benefits

How many paid company holidays are offered each calendar year? _____ Days

How many paid personal days are offered each calendar year? _____ Days

Yes No Does your company offer a combined Paid Time Off bank?

If yes, what is the accrual schedule in days?

<i>Years of Service</i>	<i>Annual Accrual</i>	<i>Comments</i>
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

If there is a separate schedule for VPs and above, please list it below:

_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

What is the maximum accrual allowed with carry over? _____ Days

Yes No Does your company offer a traditional vacation accrual plan?

If yes, what is the accrual schedule in days?

<i>Years of Service</i>	<i>Annual Accrual</i>	<i>Comments</i>
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

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_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____
_____ <i>Years</i>	_____ <i>Days</i>	_____

What is the maximum accrual allowed with carry over? _____ Days

Yes No Do new hires have a minimum period of service required before PTO/vacation accrual begins?

If yes, how long? _____ Days

2008 Mid-size Construction Benefits & Pay Practices Survey

Yes No Does your company offer a traditional sick leave program?

If yes, what is the annual accrual schedule? _____

Yes No Can unused sick days be carried over to the next year?

What is the maximum number of sick days that can be carried over? _____ Days

◆ Work/Life Benefits

(Please see glossary on page 3 for asterisked terms.)

Yes No Does your company offer a Comp Time* program?

Yes No Does your company offer flexible schedules?

Yes No Reduced Workweek*?

Yes No Four day/forty* hour week or similar scheduling?

Yes No 9/80 Schedule*?

Yes No Has your company adopted a business casual dress code?

If yes: Friday Only All week

◆ Professional Development

Yes No Does your company offer educational assistance?

If yes, what percent of tuition costs are reimbursed? _____%

What is your annual maximum reimbursement? \$_____

Yes No Must course relate to job duties to be covered?

Yes No Are both full-time and part-time employees eligible?

If reimbursement depends on grade, please list percentages below:

A _____ %

B _____ %

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D or Below _____ %

Yes No Does your company offer training in support of Professional Development?

Yes No Does your company reimburse employees for costs to obtain a professional license?

Yes No Does your company pay for renewal costs for professional licenses and registrations?

Yes No Does your company pay for dues and membership fees related to professional societies?

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Retirement Plans

401k Plan:

Yes No Does your company offer a 401(k) plan?

Yes No Is there a company match provision?

Matching Formula: _____% of first _____% (Example: 100% of first 3%)

Any additional matching: _____

Vesting Schedule _____

When is employee eligible to contribute? _____

Yes No Does your 401(k) offer a loan provision?

Yes No Does the plan allow post tax contributions?

Other Retirement Plans:

Yes No Does your company currently offer a Pension Plan?

Yes No Does your company offer a Stock Purchase Plan?

Yes No Does your company offer an ESOP Plan?

Yes No Does your company offer a Profit Sharing Plan?

What is the formula? _____

What is the eligibility? _____

What is the vesting schedule for contributions? _____

◆ Severance Plans

Yes No Does your company have a formal severance pay plan?

Eligible employees? _____

Yes No Is a release required?

Yes No Is plan ERISA qualified?

Payment terms (i.e. flat amount, one week per year of service, etc.): _____

Maximum amount (if any): _____

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Turnover

Please only provide statistics for full-time, regular, domestic employees (no craft):

Headcount as of January 1, 2007 _____

Headcount as of December 31, 2007 _____

Provide the number of terminations during the calendar year for the following reasons (Do not include transfers or promotions):

Non-Company Directed Terminations

Retired _____

Deceased _____

Medical/LTD _____

Voluntary (quits) _____

Other: _____

Company Directed Terminations

Layoff due to project completion _____

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For cause _____

Other: _____

Total Terminations _____

◆ Health and Welfare Benefits

Yes No Do you offer a Vision plan?

Yes No Do you offer a Mental Health plan? (Either included in your medical plan or as a separate plan)

Yes No Do you offer Supplemental Life Insurance?

Yes No Do you offer Long Term Care Coverage?

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Yes No If you don't offer a Health Savings Account, are you considering one?

Yes No Do you offer online benefits enrollment?

Yes No Do you reimburse employees who waive their right to medical coverage?

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◆ Health and Welfare Benefits (cont'd)

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	EE+Family	\$	EE+Family	\$	
HMO	EE	\$	EE	\$	
	EE+Spouse	\$	EE+Spouse	\$	
	EE+Child	\$	EE+Child	\$	
	EE+Family	\$	EE+Family	\$	
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PPO/ Indemnity	EE	\$	EE	\$	Orthodontia Maximum \$ _____
	EE+Spouse	\$	EE+Spouse	\$	
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***I include both employer and employee contribution

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- Immediately
 30 Days/1st of month following hire
 90 Days
 Other

List any significant changes designed to control the costs of your medical plans since last year.

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◆ Health and Welfare Benefits (cont'd)

Medical Plan Design

Please provide in-network costs for the following:

	PPO	HMO	EPO	High Deductible	Trad Major Medical	Comments
Annual Deductible						
Individual						
Family						
Co-Insurance (Employee Side)						
In-Network %						
Out-of-Network %						
Co-Pay						
Doctor						
Specialist						
Hospital						
Lifetime Maximum						
Out-of-Pocket Max						
Individual						
Family						
RX Retail						
Generic						
Brand						
Non-Formulary						
RX Mail						
Generic						
Brand						
Non-Formulary						
# Eligible						
# Enrolled						

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ IRS Section 125 Plans

Yes No Does your company offer Section 125* plans?

Yes No For medical/dental employee contributions

Yes No For medical spending account/FSA

Yes No For dependent care spending account/FSA

Yes No For other premium payments (Life, Disability, etc?):

Describe: _____

◆ Executive Benefits

Does your company offer Special Benefits for Executives?

Yes No Supplemental Pension

Yes No Physical Exam

Yes No Supplemental Life Insurance

Yes No 1st Class Travel

Yes No Spouse Travel

Yes No Airline Clubs

Yes No Supplemental Medical

Yes No Country Clubs

Yes No Supplemental Disability

Yes No Health Clubs

Yes No Tax Preparation Services

◆ Fringe Benefits

Yes No Legal Services

Yes No On-site Fitness Center

Yes No Transportation (bus pass, etc.)

Yes No On-site Cafeteria

Yes No Telecommuting

Yes No On-site Day Care Center

Yes No Job Sharing

Yes No Concierge

Yes No Parking

Yes No Service Awards

Yes No Employee Counseling or EAP

Yes No Matching Gift Programs

Yes No Discounts

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PART II – PAY PRACTICES

◆ Salary Increases-Merit Budget

Yes No Does the company have a formal salary increase budget? (For merit, general or both)

Yes No Company gives merit increases only

Yes No Company gives general increases only

Yes No Company gives both merit & general increases

When are salary increases granted:

Yes No Employee Anniversary Date

Yes No Fixed Date

If yes, fixed date for all increases _____
Month Day

Indicate the planned percent salary increase for past and next fiscal year:

	Average Total Salary Increase %
Current Fiscal Year (2008) Salary Increase Budget	

	Total % Salary Increase Budget
Next Fiscal Year (2009) Salary Increase Budget	

◆ College Graduate Hiring Rates

List average starting salaries paid to new graduates by degree and indicate the dollar amount average sign-on bonuses or relocation allowances. Use one line for each degree.

Degree Name	Degree Type	Salary Offer	Sign-On Bonus Amount	Relocation Bonus Amount
Civil Engineering	BS			
	MS			
Electrical Engineering	BS			
	MS			
Mechanical Engineering	BS			
	MS			
Construction Management/Bldg. Technology	BS			
	MS			

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◆ College Graduate Hiring Rates (cont'd)

- Yes No Does the company use formal hiring rates?
 Yes No If yes, was the previous year's rate adjusted?
- Yes No Does the company provide a formal mentor system?
- Yes No Does the company provide a formal training program?
- Yes No Does your company provide signing bonuses?

◆ Other Pay

- Yes No Do you provide sign-on bonuses for other positions?

- Yes No Do you have a per diem policy?

If yes, what are eligibility requirements? _____

How are amounts determined? _____

- Yes No Are they grossed up for taxes?

- Yes No Do you provide area uplifts?

If yes, which cities or regions?

City/Region

Amount/%

_____	_____
_____	_____
_____	_____
_____	_____

- Yes No Do you provide a housing allowance? (Separate from per diem)

If yes, what are eligibility requirements? _____

How are amounts determined? _____

- Yes No Do you provide exempt overtime?

If yes, what are eligibility requirements? _____

2008 Mid-size Construction Benefits & Pay Practices Survey

◆ Relocation Policy

Yes No Does the company have separate relocation policies by class of employee?

If yes, how many different policies apply?

- ___ College Graduates
- ___ Other New Hires
- ___ Officers
- ___ Exempt Employees
- ___ Non-Exempt Employees

Which moving expenses are typically covered?

- ___ House hunting trips
- ___ Temporary living expenses
- ___ Movement of household goods
- ___ Movement of Vehicles
- ___ Mileage Reimbursement

Yes No Do you buy former residences?

Yes No Do you gross up expenses for taxes?

◆ Bonus/Incentive Plans

Yes No Does your company offer Bonus and Incentive Compensation Plans?

If yes, describe below:

Type of Plan	Eligibility	% of EEs eligible for plan	# Eligible	# Receiving	Basis for award
Spot Award					
Management Incentive					
Project Incentive					
Other (Describe) _____					
Other (Describe) _____					

2008 Mid-size Construction Benefits & Pay Practices Survey

If you indicated a Project Incentive plan on the previous page, please respond to the following questions:

When are Project Incentives paid?

- Annually
- Upon Project Completion
- Interim Milestones (Describe: _____)
- Other (Describe: _____)

How are Project Incentives funded?

- Project Profits
- Pool of Company Funds
- Other Means (Describe: _____)

◆ Automobile/Mileage Allowance

Indicate by title if an automobile, truck or vehicle allowance is provided. Only report for positions which are included in the salary section of the Field Survey (i.e. exclude executive management positions that are reported in the Executive Salary Survey). We are only interested in determining whether the position "typically" includes a vehicle or vehicle allowance, not the number of employees. Also indicate the "cents per mile" reimbursement rate for those using company vehicles and those using personal vehicles (for company business). Use the "Other" column to describe any pertinent information about your policy (i.e., company truck for business use only, company auto for out of town use, etc.). Do not report information for executives.

Yes No Does your company offer gasoline credit cards?

Job Category	Vehicle Provided		Auto Allowance Average Amount/Month	Mileage Reimbursement for Business Use		Other (explain)
	Auto	Truck			Cents per Mile	
Project Manager or Project Executive	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Superintendent	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Engineer	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Estimator	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	\$	Company		
				Personal		

2008 Mid-size Construction Benefits & Pay Practices Survey

Are there any other benefits issues not addressed that you would like to see included in next year's survey?

If yes, describe: _____
