



## 2019 Salary Survey

Please complete the following salary survey using current information and return it to the AMM office by May 31, 2019.

Name of Municipality \_\_\_\_\_  
District \_\_\_\_\_  
Population \_\_\_\_\_  
Name of Person completing Survey/Title \_\_\_\_\_  
Email address to send the survey results to \_\_\_\_\_

### 1. Chief Administrative Officer

- a) Annual Salary \$ \_\_\_\_\_
- b) Years of Service in a CAO Position \_\_\_\_\_
- c) Is the CAO a Graduate of the CMMA program? Yes  No
- d) Has the CAO completed other Post-secondary education (or relevant business experience)?  
Yes  No
- i) If yes, what type? Certificate (specify) \_\_\_\_\_  
Diploma (specify) \_\_\_\_\_  
Degree (specify) \_\_\_\_\_
- e) How many office employees does the CAO supervise? \_\_\_\_\_
- f) How many of Management Staff within the organization?  
(incl. Assist. CAO, Officers, Managers & Directors) \_\_\_\_\_
- g) Method of determining an increase in salary for CAO (check all that apply)  
Cost of living  Merit program  Negotiated  Other  \_\_\_\_\_
- h) When is the CAO eligible for Retirement?  
Less than 5 yrs  5-10 yrs  10-15yrs  More than 15 years
- i) OPTIONAL: For the purpose of analyzing pay equity, please indicate if the CAO identifies as:  
MALE \_\_\_ FEMALE \_\_\_ NON-GENDER \_\_\_

### 2. Municipal Office Gross Expenditure Budget (as stated in the 2019 Financial Plan)

- a) What is the Municipality's General Fund (Page 1 Total Expenditure) \$ \_\_\_\_\_
- b) What is the Net Municipal Taxes and Grants in Lieu of Taxes (Page 1) \$ \_\_\_\_\_
- c) What is the Utility Fund (Page 9 Total Expenditure) - Total for all utilities \$ \_\_\_\_\_
  - i) What is the number of Utilities \_\_\_\_\_
- d) What is the number of separate entities the municipality provides (ie. bookkeeping and management services) \_\_\_\_\_

**2. Municipal Office Employees**

Job Title	FT/ PT/ Casual/	Do they supervise other staff Yes or No?	The number of years of service with any Municipal Office	Annual Salary or Hourly wage	Number of hours per week	Method in determining an increase in salary? (Cost of living/merit/negotiated/ other)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

**3. Municipal Employees – Non office staff (Public Works, Recreation, Emergency Services, etc.)**

Job Title	Number of positions	FT/ PT/ Casual	The number of years of service with any Municipal Office	Annual Salary or Hourly Wage range	Number of hours per week	Method in determining an increase in salary? (Cost of living/merit/negotiated/ other)
<b>Example: Labourer</b>	<b>8</b>	<b>4 FT/ 4 PT</b>	<b>0-15 years</b>	<b>\$20.00 – 25.50</b>	<b>50 FT/ 25 PT</b>	<b>COL</b>
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

**4. Members of Council Indemnities**

Title	Monthly indemnity	Daily per diem	Hourly per diem	Mileage per km.	Meals (is this paid by receipt or a set dollar amount per meal)	Technology allowance Yes or No?	Other type of indemnities paid (Conference calls)
Mayor/ Reeve/ Head of Council							
Deputy Mayor/ Deputy Reeve							
Councillor							

b) With Revenue Canada changing the tax exemption of the per diem, how did your municipality address this issue?

Left it as status quo  Raised the per diem 1/3  Raised the per diem \_\_\_\_ %  Other \_\_\_\_\_

**5. Employee Benefits**

a) How many sick days per month are employees allocated? \_\_\_\_\_  
 - **If any**, what is the banking maximum? \_\_\_\_\_

b) Are sick days paid out to employees upon leaving/retirement? Yes  No   
 - **If yes**, what rate are sick days paid out, (paid equal rate, % of banked days)? \_\_\_\_\_

c) Does your municipality allow municipal employees to work overtime? Yes  No   
 - **If yes**, please specify how your municipality manages employees' overtime (paid time and a half, equal time)? \_\_\_\_\_

d) Is a retirement package offered? Yes  No   
 - **If yes**, how many weeks or percentage of pay if employees work:  
 less than 5 years \_\_\_\_ 5- 10 years \_\_\_\_ 10-15 years \_\_\_\_ 15+ \_\_\_\_  
 - **If any**, what other type of benefits are included for retirement?  
 \_\_\_\_\_

e) Any other type of benefits that are offered to staff, (Maternity/Parental Leave)? \_\_\_\_\_

f) How many years of service do you need for the following vacation allotment?

2 Weeks	3 Weeks	4 Weeks	5 Weeks	6 Weeks

