

CEMENT & CONCRETE WORKERS DISTRICT COUNCIL FRINGE BENEFIT FUNDS

214-38 42nd Avenue, 2nd Floor, Bayside, NY 11361 Phone: (718) 762.6133 * Fax: (718) 762-5144 **B-Book**

EMPLOYER'S REMITTANCE AGREEMENT AND REPORT

BUILDING CONTRACTORS ASSOCIATION

{BCA}

APPRENTICE ONLY

JULY 1st 2024 TO JUNE 30th 2025

FIRST YEAR APPRE	NTICE
Welfare Fund	\$ 10.45
Pension Fund	\$ 0.00
Industry Adv. Prgm	\$ 0.26
NYSLECET	\$ 0.15
LNHSF	\$ 0.10
Training & Apprentice	\$ 0.94
Scholarship	\$ 0.06
CCWDC-L.E.C.E.T.	\$ 0.50
Amount due per hour	\$ 12.46

SECOND AND THIRD YEAR APPRENTICE						
Welfare Fund	\$ 11.45					
Pension Fund	\$ 3.00					
Industry Adv. Prgm	\$ 0.26					
NYSLECET	\$ 0.15					
LNHSF	\$ 0.10					
Training & Apprentice	\$ 0.94					
Scholarship	\$ 0.06					
CCWDC-L.E.C.E.T.	\$ 0.50					
Amount due per hour	\$ 16.46					

ANNUITY	STRAIGHT HRS {Monday – Friday}	TIME & HALF HRS {Saturdays}	DOUBLE TIME HRS {SUNDAYS & HOLIDAYS}
1 st YEAR	\$ 2.65	\$ 3.98	\$ 5.30
2 nd YEAR	\$ 3.45	\$ 5.18	\$ 6.90
3 rd YEAR	\$ 4.25	\$ 6.38	\$ 8.50

	DUES	PAC	ORG	NYSLOF	VACATION	TOTAL
1st YEAR	\$ 0.00	\$ 0.10	\$ 0.00	\$ 0.30	\$ 2.09	\$ 2.49
2 nd YEAR	\$ 3.00	\$ 0.10	\$ 1.35	\$ 0.30	\$ 2.57	\$ 7.32
3 rd YEAR	\$ 3.00	\$ 0.10	\$ 1.35	\$ 0.30	\$ 3.05	\$ 7.80

	STR HRS	X RATE	AMT	1.5 HRS	X RATE	AMT	DBL HRS	X RATE	AMT	TOTAL
0-1334 hrs.		\$ 17.60			\$ 18.93			\$ 20.25		
1335-2668 hrs		\$ 27.23			\$ 28.96			\$ 30.68		
2669-4000 hrs		\$ 28.51			\$ 30.64			\$ 32.76		
TOTAL		<u> </u>		·	·		·			

ALL INFORMATION BELOW MUST BE FULLY PROVIDED WITH EACH REPORT: Print or Type

EMF	PLOYERS NAME: PLOYERS ADDRESS: LOCATION: lore than 1 list all}							
NAN	ME AND ADDRESS OF GE	NERAL CONTRACTOR:						
Rep	ort for week beginning:	and ending:	Employers Fed	eral ID Number: <mark>*</mark>				
		{PLEASE ENTER BOTH DATES – THANK YOU}						
Emplo signing Bargai bind th	The Undersigned Employer hereby certifies that the information contained in this report and the attached schedule is true and correct, that the hours reported represent all hours worked by any cement and concrete worker in the employ of the named Employer for the period specified. The undersigned Employer hereby adopts and makes a part hereof the terms and conditions and the agreements printed on the reverse side hereof with the same force and effect as if fully set forth herein. The person signing this report on behalf of the Employer hereby consents and agrees to be personally bound by and to assume all of the terms and conditions, rights, liabilities and responsibilities of an employer in accordance with the provisions of the Collective Bargaining Agreement currently in force with the District Council of Cement and concrete Workers comprised of Locals Nos. 6-A, 18-A and 20, with the same force and effect as if fully set forth herein, and warrants and represents that he has authority to indicate the principals or members thereof. The Employer agrees to make all contributions in accordance therewith in the amount set forth on This report for each hour of employment performed within the trade and geographical jurisdiction of the District Council.							
SIGNATURE OF CORPORATE OFFICER OR PARTNERDATE								
Prin	Print Name of Signer:Title							
	SOCIAL SECURITY NUMBER	NAME	STRAIGI HOURS		DOUBLE HOURS	TOTAL HOURS		

	SOCIAL SECURITY NUMBER	NAME	STRAIGHT HOURS	TIME & HALF HOURS	DOUBLE HOURS	TOTAL HOURS
1						
2						
3						
4					_	·
5						
6						
7						
8						
9						
10						