



## Memorandum

**DATE:** May 14, 2009  
**TO:** Chairman and Members of the Board  
**FROM:** Kevin H. Roche, General Manager  
**SUBJECT:** Agenda for the Audit Committee Meeting

There is an **ecomaine Audit Committee Meeting** scheduled for **Thursday, May 21, 2009 at 2:30 p.m.** The agenda for this meeting is as follows:

1. Approval of the December 11, 2008 Audit Committee Meeting Minutes (*Attachment A*)
2. Review of Audit Committee Responsibilities
  - Kathleen Tyson of Runyon Kersteen Ouellette
3. Review of Year-end Audit Procedures and Schedule (*Attachment B*)
  - Peter Way Runyon Kersteen Ouellette
4. Selection of Auditors
5. Review of **ecomaine's** internal control procedures
6. Review of **ecomaine's** ethical policies (*Attachment C*)
7. Special Procedures (*Attachment D*)
8. Other Items
9. Future Meetings:
  - Recycling Committee: June 4<sup>th</sup> @ 4:00 p.m.
  - Finance Committee: June 11<sup>th</sup> @ 4:00 p.m.
  - Annual Meeting: June 18<sup>th</sup> @ 11:30 a.m.

The Board of Directors may wish to go into Executive Session for any of the above items under Section 405 of Title 1 of the Maine Revised Statutes ([per the following legislative website: http://janus.state.me.us/legis/statutes/1/title1ch13sec0.html](http://janus.state.me.us/legis/statutes/1/title1ch13sec0.html).)



**Corporate Members**

Bridgton  
Cape Elizabeth  
Casco  
Cumberland  
Falmouth  
Freeport  
Gorham  
Gray  
Harrison  
Hollis  
Limington  
Lyman  
North Yarmouth  
Ogunquit  
Portland  
Pownal  
Scarborough  
South Portland  
Waterboro  
Windham  
Yarmouth

**Associate Members**

Baldwin  
Cornish  
Hiram  
Limerick  
Monmouth  
Naples  
Parsonsfield  
Poland  
Porter  
Saco  
Standish

DATE: December 23, 2008  
TO: Chair and Members of the Audit Committee  
FROM: Kevin H. Roche, General Manager  
SUBJECT: Minutes of 12/11/08 **ecomaine** Audit Committee Meeting

The Audit Committee of **ecomaine** met on Thursday, December 11, 2008, at the Waste-to-Energy facility. The meeting was called to order at 4:05PM.

There were three items on the Agenda:

1. Approval of 9/18/08 Audit Committee Meeting minutes
2. FY '08 Annual Audit
3. Other Business

**Item #1 – Approval of the 9/18/08 Audit/Finance Committee Meeting Minutes**

Mr. Loveitt moved that “**The Finance Committee hereby approve the minutes of the September 18, 2008 Audit/Finance Committee meeting as presented**”. The motion was seconded by Mr. Bobinsky and passed with a unanimous vote of the Committee.

**Item #2 – FY '08 Annual Audit**

Mr. Peter Way of Runyon Kersteen Ouellette passed around updated versions of the SAS and FS documents and gave a brief overview of these reports.

Mr. Raymond discussed his findings regarding the Landfill Budget which saves **ecomaine** \$6 million.

RKO also handed out a “Financial Statement Presentation” in graph form.

It was decided that Mr. Roche and Mr. Marzilli will run some projections of year-end if the recycling market remains strained. They also noted that the Finance Committee will be discussing the recycling market at their meeting on December 18<sup>th</sup>. **ecomaine** has monies set aside for debt for the upcoming five years, but not for recycling (debt will be retired in four years).

Mr. Way also briefly discussed the Audit Letter that was handed out at the meeting. He noted that the sale of our recyclables is not included now, but will be in our new receivables system.

Mr. McGovern requested that the draft that Casey from RKO sent to him be sent to Mr. Marzilli.

By January 18<sup>th</sup>, fixed assets in the General Ledger will be coordinated by RKO.

Ms. Tyson noted that by May/June of '09, RKO should attend an Audit Committee Meeting due to the new systems and having a new Finance Director on Board after January 16<sup>th</sup> when Mr. Marzilli retires.

Our Audit reports will be due earlier next year than usual (by October 15<sup>th</sup>); assuming RKO is still doing our Audits.

Mr. McGovern requested that RKO send us an engagement letter regarding the terms of RKO doing this audit work earlier than usual, even though Ms. Tyson noted that no new dollars will be involved with the earlier start date.

He also stated that, in addition, RKO should do an "audit" of sorts of Mr. Marzilli to ensure that when the reins change, we have something in the minutes or documentation to Mr. Roche from RKO stating that all is fine as Mr. Marzilli retires.

**Mr. Van Gaasbeek then moved to recommend to the Board that they accept the Audit report. Mr. Loveitt seconded the motion and it was unanimously approved by the Committee.**

**Mr. Loveitt then moved that RKO do an audit when the Finance Director transition is complete. Ms. McGinty seconded the motion and it was unanimously approved by the Committee.**

Mr. Cole then made a motion to adjourn the meeting. The motion was seconded by Mr. Van Gaasbeek and all were in favor. The meeting adjourned at 5:05PM.

**PRESENT:**

M. Bobinsky  
G. Foster  
B. Loveitt  
S. McGinty  
Mc. McGovern  
L. Van Gaasbeek

**Other:** K. Tyson and P. Way of Runyon Kersteen Ouellette.

**Staff:** D. Doane, R. Marzilli, T. Raymond, K. Roche and L. Trufant.



Certified Public Accountants and Business Consultants

MAY 11 2009

May 8, 2009

Audit Committee  
Kevin Roche, General Manager  
Eric Doane, Director of Finance and Administration  
ecomaine  
64 Blueberry Road  
Portland, Maine 04102-1945

We are pleased to propose our understanding of the services we are to provide for ecomaine for the year ended June 30, 2009.

We will audit the statement of financial position of ecomaine as of June 30, 2009, and the related statements of activities and cash flows for the year then ended. Also, Schedules 1 through 6 (references from June 30, 2008 financial statements) were included in the prior year financial statements. Such schedules are optional at the request of management; if included for the year ended June 30, 2009, this additional information accompanying the basic financial statements would be subjected to the auditing procedures applied in our audit of the financial statements.

#### **Audit Objective**

The objective of our audit is the expression of an opinion about whether your financial statements are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America and will include tests of your accounting records and other procedures we consider necessary to enable us to express such an opinion. If our opinion is other than unqualified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed an opinion, we may decline to express an opinion or to issue a report as a result of this engagement.

#### **Audit Procedures**

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts, tests of the physical existence of inventories, and direct confirmation of receivables and certain assets and liabilities by correspondence with selected individuals, funding sources, creditors, and financial institutions. We will also request written representations from the Organization's attorneys as part of the engagement, and they may bill you for responding to this inquiry. At the conclusion of our audit, we will require certain written representations from you about the financial statements and related matters.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the Organization or to acts by management or employees acting on behalf of the Organization.

Because an audit is designed to provide reasonable, but not absolute, assurance and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform you of any material errors and any fraudulent financial reporting or misappropriation of assets that come to our attention. We will also inform you of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our audit will include obtaining an understanding of the Organization and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. However, during the audit, we will communicate to you and those charged with governance internal control related matters that are required to be communicated under professional standards.

We may from time to time, and depending on the circumstances, use third-party service providers in serving your account. We may share confidential information about you with these service providers, but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures, and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, we will remain responsible for the work provided by any such third-party service providers.

### **Management Responsibilities**

You are responsible for making all management decisions and performing all management functions; for designating an individual with suitable skill, knowledge, or experience to oversee any tax services and any other nonattest services we provide; and for evaluating the adequacy and results of those services and accepting responsibility for them.

You are responsible for establishing and maintaining internal controls, including monitoring ongoing activities; for the selection and application of accounting principles; and for the fair presentation in the financial statements of financial position, changes in net assets, and cash flows in conformity with U.S. generally accepted accounting principles. You are also responsible for making all financial records and related information available to us and for the accuracy and completeness of that information. Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Organization involving (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Organization received in communications from employees, former employees, grantors, regulators, or others. In addition, you are responsible for identifying and ensuring the Organization complies with applicable laws and regulations and for taking timely and appropriate steps to remedy any fraud, illegal acts, or violations of contracts or grant agreements that we may report.

#### **Engagement Administration, Fees, and Other**

We understand that your employees will prepare all cash, accounts receivable, and other confirmations we request and will locate any documents selected by us for testing.

Kathy Tyson is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it. We expect to begin our audit in August of 2009 and to issue our report by September 30, 2009.

We estimate that our fees for the engagement will range from \$25,850 to \$29,850. The fee estimate is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the audit. If significant additional time is necessary, we will discuss it with you and arrive at a new fee estimate before we incur the additional costs. Our invoices for these fees will be rendered as work progresses and are payable on presentation.

ecomaine  
May 8, 2009  
Page 4

We appreciate the opportunity to be of service to you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the enclosed copy, and return it to us.

Very truly yours,



Peter H. Way  
Runyon Kersteen Ouellette

RESPONSE:

This letter correctly sets forth the understanding of ecomaine.

---

Officer signature

---

Title

---

Date



## PERSONNEL MANUAL

07/01/08

### Owner Communities

Bridgton  
Cape Elizabeth  
Casco  
Cumberland  
Falmouth  
Freeport  
Gorham  
Gray  
Harrison  
Hollis  
Limington  
Lyman  
North Yarmouth  
Ogunquit  
Portland  
Pownal  
Scarborough  
South Portland  
Waterboro  
Windham  
Yarmouth

### Associate Communities

Baldwin  
Cornish  
Hiram  
Limerick  
Monmouth  
Naples  
Parsonsfield  
Poland  
Porter  
Saco  
Standish

1. Family and Medical Leave Policy
2. Policy Against Harassment
3. Alcohol and Drug/CDL Policy
4. Waste and Recyclable Material Removal Policy
5. Smoking Policy
6. Relative and Personal Relationships Policy
7. Ethics Policies
  - a. Electronic Communications
  - b. Acceptance of Gifts
  - c. Travel
  - d. Use of Company Property
8. Employee Evaluations
9. Emergency Notification and Communication Procedure
10. Employee Use of Disposal Facilities
11. Employee Acknowledgement



## ecomaine

### Family and Medical Leave Policy

March 1, 1999

Rev. 04/05/99

This Policy applies to all employees of ecomaine covered by the U.S. Department of Labor Family Medical Leave Act (FMLA) and provides the procedures under which an employee may request unpaid time off, for a limited period, with job protection and no loss of accumulated service if the employee returns to work.

#### DEFINITION

A family or medical leave of absence may be approved for up to twelve (12) weeks of unpaid leave during a twelve (12) month period. The twelve-month period is measured backward from the date that the employee uses any FMLA leave.

Leave may be taken:

1. on the birth of an employee's child;
2. on the placement of a child for adoption or foster care with an employee;
3. when an employee is needed to care for a child, spouse or parent who has a serious health condition; or
4. when an employee is unable to perform at least one of the essential functions of his or her position because of the employee's own serious health condition.

#### SCOPE

This policy applies to all FMLA leaves of absence, including leaves that are covered under paid employment benefit plans or policies for any part of the twelve (12) weeks leave to which the employee may be entitled under this policy and the paid leave and the FMLA leave will run concurrently. Employees must use any accumulated paid sick leave, excluding hours paid by Workers' Compensation, prior to using unpaid FMLA leave only. Employees may be allowed to use accumulated paid vacation leave prior to using unpaid FMLA leave.

#### ELIGIBILITY

To be eligible for leave under this policy, an employee must have been employed by ecomaine for at least twelve (12) months and must have worked at least twelve hundred fifty (1,250) hours during the twelve (12) month period preceding the beginning of the leave. If the employee on leave is among the highest paid 10 percent (10%) of salaried ecomaine employees and keeping his or her job open could result in substantial and grievous economic injury to ecomaine, the employee can be denied job restoration after leave; however, the employee will be given an opportunity to return to work during the leave.

#### REGULATIONS AND CONDITIONS

ecomaine will require medical certification to support a claim for leave for an employee's own serious health condition or to care for a seriously ill family member as defined above. For the employee's own medical leave, the certification must include a statement that the employee is unable to perform at least one (1) of the functions of his or her position. For leave to care for a seriously ill family member, the certification must include an estimate of the amount of time that the employee is needed to provide care.

ecomaine may require a second medical opinion and periodic re-certification at ecomaine expense. If the first and second opinions are different, ecomaine may require the binding opinion of a third health care provider, approved jointly by ecomaine and the employee and paid for by ecomaine.

Leave may be taken on an intermittent or reduced leave schedule if it is medically necessary for a serious health condition of the employee or his or her spouse, child or parent; however, if leave is requested on this basis, ecomaine may require the employee to transfer temporarily to a part-time schedule or an alternative position that better accommodates recurring absences. The alternative position will have equivalent pay and benefits.

Spouses who are both employed by ecomaine are entitled to a joint total of twelve (12) weeks of FMLA, not twelve (12) weeks each, for the birth or placement for adoption or foster care of a child, or for the care of a sick parent. For any other qualifying FMLA leave, each spouse will be entitled to the full twelve (12) weeks of FMLA leave, or that portion remaining in the relevant twelve (12) month period.

#### **NOTIFICATION AND REPORTING**

When the need for FMLA leave is foreseeable, the employee must provide reasonable prior notice and make an effort to schedule leave so that it does not unduly disrupt ecomaine operations. Employees who are ill will be required to report in writing periodically on their status and their intention to return to work.

#### **STATUS OF BENEFITS**

Group health care coverage will continue for employees on FMLA leave as if they were still working. Employees who are granted an approved leave under this policy are advised to arrange to pay their share of the premiums during the absence. If the leave is paid, premiums will continue to be paid through payroll deduction; however, if the leave is unpaid, employees are responsible for making sure that ecomaine receives their premium payments by the normal payroll dates. ecomaine will provide a schedule of payment amounts and due dates at the beginning of any unpaid leave of absence.

If an employee chooses not to return to work, or does not stay at work for at least thirty (30) days upon return, for reasons other than retirement, after an approved unpaid leave of absence, ecomaine may recover from the employee the cost of any payments made to maintain the employee's health insurance, unless the failure to return is because of a serious health condition or reasons beyond the employee's control. Benefit entitlements based on length of service will be calculated as of the last paid workday before the start of the unpaid absence.

#### **PROCEDURES**

An ecomaine "Request for Family or Medical Leave of Absence" form (copy attached) must be filled out in duplicate by the employee. This form must be completed in detail, signed by the employee, submitted to the employee's Director, or designee, for proper approvals and forwarded to Finance and Administration. If possible, the form should be submitted thirty (30) days before the effective date of the leave.

All requests for FMLA leaves due to illness must include an ecomaine "Certification of Physician or Practitioner" form (copy attached).

All requests for FMLA will be responded to with an ecomaine "Response to Request for Family or Medical Leave of Absence" (copy attached).



REQUEST FOR FAMILY OR MEDICAL LEAVE OF ABSENCE

Employee's name: \_\_\_\_\_

Date of request: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Does your spouse work for this company: (check one)

Yes  No

Reasons for taking leave: (check one)

- to care for my child after birth or placement in adoption or foster care;
- to care for my spouse, child or parent who has a serious health condition; or
- my own serious health condition makes me unable to perform at least one of the essential functions of my job.

For leave to be taken all at once, rather than intermittently or on a reduced workweek:

Date leave is to start: \_\_\_\_\_

Date I expect to return to work: \_\_\_\_\_

For leave to be taken intermittently or on a reduced workweek:

Schedule of time needed off: \_\_\_\_\_

Note: Intermittent or reduced-schedule leave for the birth or placement of a child is subject to the company's approval.

Employee's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor's signature: \_\_\_\_\_

Date: \_\_\_\_\_

CERTIFICATION OF PHYSICIAN OR PRACTITIONER

Certification of Health Care Provider  
Family and Medical Leave Act of 1993

U.S. Department of Labor  
Employment Standards Administration  
Wage and Hour Division

1. Employee's Name	2. Patient's Name ( if different from employee)
--------------------	---

3. The attached sheet describes what is meant by a "serious health condition" under the Family and Medical Leave Act. Does the patient's condition qualify under any of the categories described? If so, please check the applicable category.

- (1) \_\_\_\_\_ (4) \_\_\_\_\_  
 (2) \_\_\_\_\_ (5) \_\_\_\_\_  
 (3) \_\_\_\_\_ (6) \_\_\_\_\_  
 or, none of the above \_\_\_\_\_

4. Describe the medical facts which support your certification, including a brief statement as to how the medical facts meet the criteria of one of these categories.\*

5.a State the approximate date the condition commenced, and the probable duration of the condition (and also the probable duration of the patient's present incapacity\*\* if different):

b. Will it be necessary for the employee to take work only intermittently or to work on a less than full schedule as a result of the condition (including for treatment described in item 6 below)? If yes, give probable duration:

c. If the condition is a chronic condition (condition #4) or pregnancy, state whether the patient is presently incapacitated\*\* and the likely duration and frequency of episodes of incapacity\*\*:

6.a. If additional treatments will be required for the condition, provide an estimate of the probable number of such treatments:

If the patient will be absent from work or other daily activities because of treatment on an intermittent or part-time basis, also provide an estimate of the probable number of and interval between such treatments, actual or estimated dates of treatment if known, and period required for recovery if any:

b. If any of these treatments will be provided by another provider of health services (e.g. physical therapist), please state the nature of the treatments:

\* Here and elsewhere on this form, the information sought relates only to the condition for which the employee is taking FMLA leave.

\*\* "Incapacity", for purposes of FMLA, is defined to mean inability to work, attend school or perform other regular daily activities due to the serious health condition, treatment therefore, or recovery therefrom.

c. If a regimen of continuing treatment by the patient is required under your supervision, provide a general description of such regimen (e.g., prescription drugs, physical therapy requiring special equipment):

7.a. If medical leave is required for the employee's absence from work because of the employee's own condition (including absences due to pregnancy or a chronic condition), is the employee unable to perform work of any kind?

b. If able to perform some work, is the employee unable to perform any one or more of the essential functions of the employee's job (the employee or the employer should supply you with information about the essential job functions)? If yes, please list the essential functions the employee is unable to perform:

c. If neither a. nor b. applies, is it necessary for the employee to be absent from work for treatment?

8.a. If leave is required to care for a family member of the employee with a serious health condition, does the patient require assistance for basic medical or personal needs or safety, or for transportation?

b. If no, would the employee's presence to provide psychological comfort be beneficial to the patient or assist in the patient's recovery?

c. If the patient will need care only intermittently or on a part-time basis, please indicate the probable duration of this need:

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(signature of Health Care Provider)

\_\_\_\_\_  
(Type of practice)

\_\_\_\_\_  
(address)

\_\_\_\_\_  
(telephone number)

To be completed by the employee needing family leave to care for a family member:

State the care you will provide and an estimate of the period during which care will be provided, including a schedule if leave is to be taken intermittently or if it will be necessary for you to work less than a full schedule:

\_\_\_\_\_  
(Employee signature)

\_\_\_\_\_  
(date)

A "Serious Health Condition" means an illness, injury, or physical or mental condition that involves one of the following:

#### 1. HOSPITAL CARE

Inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility, including any period of incapacity\*\* or subsequent treatment in connection with or consequent to such inpatient care.

#### 2. ABSENCE PLUS TREATMENT

(a) A period of incapacity\*\* of more than three consecutive calendar days (including any subsequent treatment or period of incapacity\*\* relating to the same condition), that also involves:

1. Treatment\*\*\* two or more times by a health care provider, by a nurse or physician's assistant under supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or on referral by, a health care provider; or
2. Treatment by a health care provider on at least one occasion which results in a regimen of continuing treatment\*\*\*\* under the supervision of the health care provider.

#### 3. PREGNANCY

Any period of incapacity due to pregnancy, or for prenatal care.

#### 4. CHRONIC CONDITIONS REQUIRING TREATMENTS

A chronic condition which:

- (a) Requires periodic visits for treatment by a health care provider, or by a nurse or physician's assistant under direct supervision of a health care provider;
- (b) Continues over an extended period of time (including recurring episodes of a single underlying condition); and
- (c) May cause episodic rather than a continuing period of incapacity\*\* (e.g., asthma, diabetes, epilepsy, etc.).

#### 5. PERMANENT/LONG-TERM CONDITIONS REQUIRING SUPERVISION

A period of incapacity\*\* which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer's, a severe stroke, or the terminal stages of a disease.

#### 6. MULTIPLE TREATMENTS (NON-CHRONIC CONDITIONS)

Any period or absence to receive multiple treatments ((including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity\*\* of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), and kidney disease (dialysis).

\*\*\* Treatment includes examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations.

\*\*\*\* A regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of treatment does not include the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider.

ecomaine

## RESPONSE TO REQUEST FOR FAMILY OR MEDICAL LEAVE OF ABSENCE

To: \_\_\_\_\_

From: \_\_\_\_\_

Subject: Request for Family or Medical Leave

On \_\_\_\_\_, you notified ecomaine of your need to take family/medical leave due to:

- the birth of a child, or the placement of a child with you for adoption or foster care; or
- a serious health condition that makes you unable to perform the essential functions of your job, or;
- a serious health condition affecting your spouse, child or parent (circle the ones that apply) for which you are needed to provide care.

You notified ecomaine that you need this leave beginning on \_\_\_\_\_ and that you expect the leave to continue until on or about \_\_\_\_\_

Except as explained below, you have a right under the FMLA for up to twelve (12) weeks of unpaid leave in a twelve (12) month period for the reasons listed above. Also, your health benefits must be maintained during any period of unpaid leave under the same conditions as if you continued to work, and you must be reinstated to the same or an equivalent job with the same pay, benefits and terms and conditions of employment on your return from leave. If you do not return to work following FMLA leave for a reason other than: (1) the continuation, recurrence or onset of a serious health condition which would entitle you to FMLA leave; or (2) other circumstances beyond your control, you may be required to reimburse ecomaine for the cost of health insurance paid by ecomaine on your behalf during your FMLA leave.

This is to inform you that: (check appropriate boxes and explain where indicated)

1. You are  eligible  not eligible for leave under the FMLA.
2. The requested leave  will  will not be counted against your annual FMLA leave entitlement.
3. You  will  will not be required to furnish medical certification of a serious health condition. If required, you must furnish certification by \_\_\_\_\_ (date must be at least 15 days after you are notified of this requirement) or ecomaine may delay the commencement of your leave until the certification is submitted.
4. You may elect to substitute paid leave for unpaid FMLA leave. ecomaine  will  will not require that you substitute accrued paid leave for unpaid FMLA leave. If paid leave will be used, the following conditions will apply:

- 5(a). If you normally pay a portion of the premiums for your health insurance, these payments will continue during the period of FMLA leave. Arrangements for payment have been discussed with you and it is agreed that you will make premium payment as follows:
- (b). You have a thirty (30) day grace period in which to make premium payments. If payment is not made timely, your group health insurance may be canceled, provided that ecomaine notifies you, in writing, at least fifteen (15) days before the date that your health coverage will lapse, or at ecomaine's option, ecomaine may pay your share of the premiums during FMLA leave and recover these payments from you on your return to work. ecomaine  
 will       will not      pay your share of the health insurance premiums while you are on leave.
- (c). ecomaine  
 will       will not      do the same with other benefits (e.g., life insurance, disability insurance, etc.) while you are on FMLA leave. If ecomaine does pay your premiums for other benefits, when you return from leave you  
 will       will not      be expected to reimburse ecomaine for the payments made on your behalf.
6. You  
 will       will not      be required to present a fitness-for-duty certificate prior to being restored to employment. If such certification is required, but not received, your return to work may be delayed until certification is provided.
- 7(a). You  
 are       are not      a "key employee" as described in section 825.218 of the FMLA regulations. If you are a "key employee", restoration to employment may be denied following FMLA leave on the grounds that such restoration will cause substantial and grievous harm to ecomaine.
- (b). ecomaine  
 has       has not      determined that restoring you to employment at the conclusion of FMLA leave will cause substantial and grievous harm to ecomaine (explain):
8. While on leave, you  
 will       will not      be required to furnish ecomaine with periodic reports every \_\_\_\_\_ of your status and intent to return to work. If the circumstances of your leave change and you are able to return earlier than the date indicated earlier on this form, you  
 will       will not      be required to notify ecomaine at least two (2) work days prior to the date you intend to report for work.
9. You  
 will       will not      be required to furnish re-certification relating to a serious health condition. (explain):



# Memorandum

Date: December 10, 2007  
To: All ecomaine staff, Vendors, Customers and Visitors  
From: Kevin H. Roche  
General Manager  
Subject: ecomaine Policy Against Harassment

ecomaine

## POLICY AGAINST HARASSMENT

It is the policy of ecomaine that all of our employees have the right to work in an environment free from harassment and intimidation. Harassment and intimidation based on sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability is a violation of ecomaine policy. Harassment based on sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability also constitutes illegal employment discrimination. Because harassment on the basis of sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability seriously undermines the integrity of the workplace, and adversely affects employee morale, it is unacceptable and will not be tolerated. Additionally, it is considered grounds for discipline, up to and including discharge.

Examples of harassment related to sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability include the following which may be a series of incidents or a single occurrence:

- Unwelcome sexual advances, gestures, comments or contact;
- Threats;
- Offensive jokes;
- Subjecting employees to ridicule, slurs, or derogatory actions;
- Basing employment decisions or practices on submission to such harassment;
- Refusal to work with employees in performing work assignments;
- Inequitable disciplinary actions and work assignments.

Harassment based on sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability is unprofessional and cannot be tolerated in the workplace. All employees have a responsibility for keeping our work environment free of harassment. Any employee, who becomes aware of an incident of harassment, whether by witnessing the incident or being told of it, must report it to their immediate supervisor or management. When managers and supervisors become aware of the existence of harassment, they must take prompt corrective action, whether or not the victim wants ecomaine to do so. Appropriate disciplinary procedures must be utilized in resolving incidents of such harassment.

The Maine Human Rights Commission defines sexual harassment as unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when: (a) submission to such conduct is either explicitly or implicitly a term or condition of an individual's employment; (b) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individuals; (c) such conduct has the purpose or effect of substantially interfering with the individual's work performance or creating an intimidating, hostile or offensive working environment.

While ecomaine encourages employees to communicate directly with the alleged harasser and make clear that the alleged harasser's behavior is unacceptable, offensive or inappropriate, it is not required that employees do so. It is essential, however, to notify your supervisor immediately even if you are not sure the offending behavior is considered harassment. Retaliation for filing a complaint or assisting in the investigation of a complaint will not be permitted. No adverse employment action will be taken for any employee making a good faith report of alleged harassment.

All complaints of harassment on the basis of sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability will be promptly and carefully investigated. All employees are assured that they will be free from any and all reprisals or retaliation from filing such complaints. Any employee who has a complaint of harassment in the workplace by anyone, including supervisors, co-workers or visitors should immediately present the complaint to their supervisor. If the complaint involves supervisory personnel, or if the employee is uncomfortable with submitting the complaint to the supervisor, the complaint should be submitted to the Director of Finance and Administration.

The investigation of the allegation of harassment will include interviews with all relevant persons. ecomaine will keep the identity of the complainant and the person accused of harassment as confidential as possible, but confidentiality cannot be guaranteed.

After the investigation is completed, the findings will be reviewed with the complainant. If the investigation reveals that the complaint appears valid, immediate action, up to and including discharge, will be taken to stop the harassment and prevent its recurrence. If the validity of the complaint cannot be determined, immediate and appropriate action will be taken to assure that all parties involved are reacquainted with ecomaine's harassment policy. ecomaine will also take any additional action necessary to appropriately remedy the situation.

Maine's Whistleblower Protection Act also protects any employee, acting in good faith, from discharge or retaliation, for the reporting to the employer what the employee has reasonable cause to believe is a violation of a law or rule of the State of Maine, a political subdivision of the State or the United States. This law also prohibits discrimination against an employee who is requested to participate in an investigation, hearing or inquiry held by a public body or court of law.

Attachments:

- “ecomaine Report of Claim of Harassment”
- “ecomaine Report of Harassment Acknowledgement Form”
- “Sexual Harassment Regulations of the Maine Human Rights Commission”
- “Summary of Maine Whistleblower’s Protection Act”
- Maine Human Rights Commission Poster
- Maine Human Rights Commission Brochure

Report of Claim of Harassment

Complainant: \_\_\_\_\_

Reporter (if different): \_\_\_\_\_

Incident occurred on: \_\_\_\_\_

Incident reported on: \_\_\_\_\_

Person(s) accused: (If unable to identify by name, describe person by indicating sex, age, height, weight, hair color, build, distinctive features, clothing, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Witness(es): \_\_\_\_\_

\_\_\_\_\_

Describe the incident: (Please attach additional sheets if needed.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of complainant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of reporter: \_\_\_\_\_

Date: \_\_\_\_\_



Report of Harassment Acknowledgement Form

In keeping with ecomaine's "Policy Against Harassment" which requires reporting inappropriate conduct in the workplace, I have made a written report of harassment and have been assured of the following by ecomaine:

1. Retaliation for making a report of harassment is prohibited. I agree to promptly report any retaliatory action as a result of my complaint by co-workers or supervisors, to management immediately.
2. I understand that my written statement, and information provided by possible witnesses, will be used by management to investigate this matter.
3. I will not be transferred, or put on paid leave, without my consent as a result of my bringing this charge.
4. Management will keep me informed of the progress in its investigation and its findings.
5. Understanding that discipline is confidential until finalized, I will be informed to the extent possible when disciplinary action is taken.

Employee: \_\_\_\_\_

Date: \_\_\_\_\_

Management: \_\_\_\_\_

Date: \_\_\_\_\_

## SEXUAL HARASSMENT REGULATIONS OF THE MAINE HUMAN RIGHTS COMMISSION

1. Harassment on the basis of sex is a violation of Section 46572 of the Maine Human Rights Act. Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

- a. submission to such conduct is either explicitly or implicitly a term or condition of an individual's employment;
- b. submission to, or rejection of, such conduct by an individual is used as the basis for employment decisions affecting such individual; or
- c. such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

2. An employer, employment agency, joint apprenticeship committee or labor organization (hereinafter collectively referred to as "employer") is responsible for its acts and those of its agents and supervisory employees with respect to sexual harassment regardless of whether the specific acts complained of were authorized, or even forbidden, by the employer and regardless of whether the employer knew, or should have known, of their occurrence.

3. With respect to persons other than those mentioned in paragraph 2 of this section, an employer is responsible for acts of sexual harassment in the workplace when the employer, or its agents or supervisory employees knows, or should have known, of the conduct. An employer may rebut apparent liability of such acts by showing that it took immediate and appropriate corrective action.

§3.06 (H) of the Employment Regulations of the Maine Human Rights Commission

## SUMMARY OF MAINE WHISTLEBLOWER'S PROTECTION ACT

(Title 26 M.R.S.A. § 831, et seq.)

No employer may discharge, threaten or otherwise discriminate against an employee regarding the employee's compensation, terms, conditions, location or privileges of employment because:

1. The employee, acting in good faith, reports to the employer what the employee has reasonable cause to believe is a violation of a law or rule of the State of Maine, a political subdivision of the State or the United States;
2. the employee, acting in good faith, reports what the employee has reasonable cause to believe is a condition or practice that would put at risk the health or safety of that employee or any other individual;
3. the employee is requested to participate in an investigation, hearing or inquiry held by a public body or in a court action; or
4. the employee, acting in good faith, refuses to carry out a directive that would expose the employee to a condition that would result in serious injury or death, after having sought and been unable to obtain a correction of the dangerous condition.

The employee must first bring the alleged violation to the attention of a person having supervisory authority with the employer, and allow the employer a reasonable opportunity to correct that violation, unless the employee has specific reasons to believe that reports to the employer will not result in a prompt correction of the violation, condition or practice.

# THE MAINE HUMAN RIGHTS ACT PROHIBITS SEX DISCRIMINATION

## SEXUAL HARASSMENT ON THE JOB IS ILLEGAL

- UNWELCOME SEXUAL ADVANCES
- SUGGESTIVE OR LEWD REMARKS
- UNWANTED HUGS, TOUCHES, KISSES
- REQUESTS FOR SEXUAL FAVORS
- RETALIATION FOR COMPLAINING  
ABOUT SEXUAL HARASSMENT

**MAINE=  
HUMAN  
RIGHTS  
COMMISSION**

**(207) 624-6050**

IF YOU FEEL YOU HAVE BEEN DISCRIMINATED AGAINST, CONTACT THE COMMISSION OFFICE.  
51 STATE HOUSE STATION, AUGUSTA, MAINE 04333-0051

OR CONTACT YOUR PERSONNEL DEPARTMENT REPRESENTATIVE





Alcohol and Drug Policy and Testing Procedures  
for the  
Omnibus Transportation Employee Testing Act of 1991

## 1. POLICY STATEMENT AND AUTHORIZATION

ecomaine has a strong commitment to the health, safety and welfare of its employees, their families, its customers and the public at large. Accordingly, ecomaine seeks to hire and employ workers requiring a Commercial Drivers License (CDL) who are free from the illegal use and abuse of drugs and alcohol, and to protect employees, their families and the public from the adverse effects of alcohol and drug abuse. ecomaine requires that final applicants selected for the positions requiring a CDL undergo an Alcohol and Drug Test to detect the presence of alcohol and drug abuse substances in the body.

Any Applicant with a positive preemployment test may be denied employment by ecomaine by reason of the Positive Test.

The use and misuse of alcohol or drugs, whether prescribed or illegal, impairs the ability of an employee to perform assigned duties, particularly those requiring a CDL, and may endanger the employee, co-workers, the public, ecomaine and public or private property. ecomaine seeks to prevent employees from using alcohol and drugs when the use of such is illegal, or in any way endangers ecomaine or the public. ecomaine also wants to provide appropriate and reasonable assistance to employees whose use or misuse impairs their ability to perform their duties.

This policy is designed to comply with the Omnibus Transportation Employee Testing Act of 1991 and with the Rules and Regulations under CFR 49 Part 653, Prevention of Prohibited Drug Use in Transit Operations and CFR 49 Part 382, Substances and Alcohol Use and Testing (both published February 15, 1994) and related parts, and to provide guidance to ecomaine officials on the implementation of the requirements of the Act and may, from time to time, be revised by ecomaine.

## 2. DRUG AND ALCOHOL TESTING

The following circumstances shall require Drug and Alcohol Testing:

1. Preemployment. Preemployment Drug Testing shall be conducted before applicants are hired or after an offer to hire, but before actually performing safety-sensitive functions for the first time. Testing is also required when employees transfer to a safety-sensitive (driver) position. Preemployment alcohol testing shall be required when, or if, the Federal Government requires it.
2. Post Accident. Post accident testing shall be conducted after accidents on drivers whose performance could have contributed to the accident (as

- determined by a citation for a moving traffic violation) and for all fatal accidents even if the driver is not cited for a moving traffic violation.
3. Reasonable Suspicion. Reasonable Suspicion testing shall be conducted when a trained supervisor has Reasonable Suspicion, based upon specific, contemporaneous, articulate observations concerning the appearance, behavior, speech or body odors, that the employee has:
    - a. Unlawfully used illicit drugs and/or abused controlled substances;  
or
    - b. Reported to work under the influence of, or has illicitly ingested, controlled substances or alcohol during work hours.
  4. Random. Random testing shall be conducted on a random, unannounced basis just before, during or just after performance of a safety-sensitive function. Fifty percent (50%) of employees in safety-sensitive positions must be tested for controlled substances and twenty-five percent (25%) of employees in safety-sensitive positions must be tested for alcohol on an annual basis.
  5. Return to Duty and Follow-up. Return to duty and follow-up testing shall be conducted when an individual who has violated the prohibited alcohol or drug conduct standards returns to performing safety-sensitive duties. Follow-up tests are unannounced and at least six tests must be conducted in the first 12 months after a driver returns to duty.

### 3. RESPONSIBILITY

It is the responsibility of the Management of *ecomaine*, under the direction of the General Manager to administer and enforce this policy and the procedures as outlined. Employment by *ecomaine* shall not be deemed to have been offered nor shall a prospective employee have the right to accept any offer, or suggestion of an offer, of employment until such time as a drug test evaluation has been received and cleared by management. Any work performed by an individual for, or on behalf of, *ecomaine* prior to such approval shall not involve operation of any *ecomaine* equipment requiring a CDL prior to testing.

*ecomaine* will contract for specimen collection, medical review, testing and training for supervisors and employees. It is the responsibility of each Director, Superintendent, Supervisor, Manager and the General Manager to administer applicable sections of this policy.

It is the responsibility of Management to see that supervisors are properly trained and that employees have notice of, and are familiar with, these drug and alcohol policies and procedures.

### 4. DEFINITIONS

*Alcohol and Drug Test.* A generally accepted and proven test methodology or methodologies as recommended by the Rules and Regulations under CFR 49 Part 653, Prevention of Prohibited Drug Use in Transit Operations and CFR Part 382, Substances

and Alcohol Use and Testing. This test method determines whether an individual has ingested or otherwise used the substance in question within a period of time before the test.

*Applicant.* A person who has applied for a position with ecomaine, including past employees eligible for rehiring and present employees voluntarily seeking another position.

*Medical Review Officer (MRO).* Physician responsible for reviewing all test results for confirmation prior to communicating same to the employer. The MRO is required to protect the confidentiality of the individual involved.

*NIDA.* The National Institute on Drug Abuse.

*Positive Test.* Alcohol and drug test results that meet or exceed standards outlined under CFR 49.

*Random Testing.* A scientific method used to select employees for testing at random. This method will occur throughout the year and involve a minimum of fifty percent (50%) of the pool of employee positions requiring a CDL selected for drug testing and minimum of twenty-five percent (25%) of the pool for alcohol testing. The minimum percent to be tested may decrease in subsequent years based on the number of confirmed Positive Test results.

*Reasonable Suspicion.* A determination made by a trained supervisor that an employee is in violation of the Omnibus Transportation Employee Testing Act of 1991 concerning alcohol or controlled substances. This determination must be based upon specific, contemporaneous, articulate observations concerning the appearance, behavior, speech and body odors of the driver. Circumstances which may constitute a basis for determining Reasonable Suspicion may include, but are not limited to:

1. A pattern of abnormal or erratic behavior;
2. Information provided by a reliable and credible source;
3. Direct observation of drug or alcohol use;
4. Presence of the physical symptoms of drug or alcohol use (i.e., glassy or bloodshot eyes, an alcohol odor on breath, slurred speech. Poor coordination and/or reflexes);
5. Any trained supervisor who has Reasonable Suspicion to believe that a violation has occurred must complete an "Observed Behavior-Reasonable Cause Record" form within twenty-four (24) hours of the observed behavior or before the results of the tests are released, whichever is earlier.

*Substance Abuse.* The use of alcohol, prescription or over-the-counter drugs, any of which impairs the ability of an employee to perform the job safely and effectively, or the use of illegal drugs or other controlled substances without a valid prescription.

*Work-Related Vehicular Accident.* Any reportable vehicular accident that damages property or involves injury to self or others for which a moving traffic violation citation is issued (does not include minor personal injury not requiring transport to a medical facility or care beyond first aid). Any vehicular accident involving a fatality.

## 5. PROHIBITED CONDUCT

The following conduct or behavior is determined to be unacceptable and therefore is prohibited under this policy. Violation shall be cause for disciplinary action.

1. Reporting to, or remaining on, duty with a blood/alcohol concentration of 0.02, or greater. Any employee found to have a blood/alcohol concentration of at least 0.02 but less than 0.04 shall be immediately removed from the safety-sensitive position and shall not be permitted to perform that function until the start of the driver's next regularly scheduled duty period, but not less than 24 hours following administration of the test. Any employee found to have a blood/alcohol concentration of greater than 0.04 may be subject to further disciplinary action.
2. Possessing alcohol on duty.
3. Use of alcohol while on duty.
4. Use of alcohol for eight (8) hours after an accident that will require a post accident test or until the test is performed, whichever occurs first.
5. Any use of alcohol within four (4) hours of reporting to duty to perform a safety-sensitive position.
6. Refusal to submit and properly participate in a required alcohol and/or controlled substance test. A refusal is defined as.
  - a. Failing to report immediately to the identified testing site, once notified, but in no case, more than two (2) hours after notification.
  - b. Failing to follow proper instructions or participate in the required testing procedures.
7. Reporting to, or remaining on, duty while using any controlled substance, except when used under the direct orders of a physician and the physician has informed the employee that the use will not affect the safety use and operation of the commercial vehicle.
8. Reporting to, or remaining on, duty after testing positive for any controlled substance under this policy.

## 6. TESTING FOR JOB APPLICANTS AND EMPLOYEES

When chemical drug and alcohol screening is required under the provisions of this policy and CFR Title 49, a breath test and/or urinalysis test will be given to detect the presence of the following drug groups:

1. Alcohol (ethyl)
2. Amphetamines
3. Cocaine
4. Opiates
5. Phencyclidine (PCP)
6. Marijuana

Applicants for all classes of employment requiring a CDL will be required to undergo a chemical drug and alcohol test upon an offer of employment and prior to their final appointment to that position.

ecomaine may require a current employee whose position requires a CDL to undergo drug and alcohol testing if there is Reasonable Suspicion by the immediate supervisor or other trained management personnel that the employee is under the influence of drugs or alcohol during work hours.

Supervisors are required to document the specific facts, symptoms or observations which formed the basis that Reasonable Suspicion existed to warrant the testing of an employee. This documentation shall be forwarded to the appropriate Director and the Department of Finance and Administration. The "Observed Behavior-Reasonable Cause Record" form must be completed.

ecomaine will require a current employee in a position requiring a CDL to undergo post accident drug and alcohol testing if he or she is involved in a reportable vehicular accident or if there is a fatality.

All current employees in safety-sensitive positions requiring the use of a CDL will be subject to Random Testing.

ecomaine subscribes to drug abuse counseling and referral services.

Records shall be maintained by the Department of Finance and Administration of supervisory training given.

Records shall be maintained by the Department of Finance and Administration documenting that employees have been provided with information required under this policy.

## 7. TESTING PROCEDURES

Before a drug and alcohol test is administered, employees and job applicants will be asked to sign a consent form authorizing the test and permitting the release of test results to those ecomaine officials with a need to know. The chemical screen consent form shall provide space to indicate current or recent use of prescription and over-the-counter medication.

All recruitment announcements for any position requiring a CDL, including in-house recruitment and promotion, will disclose that a chemical, alcohol and drug-screening test will be required for the Applicant.

Before any ecomaine official makes a conditional offer of employment to an Applicant, they will notify the Department of Finance and Administration of the final or top Applicant for the position. The Department of Finance and Administration will schedule a chemical, alcohol and drug-screening test for the Applicant.

The Applicant will be given a copy of this policy, a consent form to complete and sign and will be informed of the test appointment.

The MRO will notify the Applicant of the test results, and, if positive, will give the Applicant an opportunity to discuss same prior to release of the information to ecomaine.

After the Department of Finance and Administration has received the test results from the MRO or medical facility, they will not inform the hiring department of the test results. This disclosure from the MRO will state whether the test is positive or negative, if positive, which substances were detected and shall be kept confidential by the Department of Finance and Administration.

After the Department of Finance and Administration has received the test results from the MRO or medical facility, they will inform the hiring Director whether or not the Applicant is eligible for employment. All results shall be kept confidential.

A supervisor may upon Reasonable Suspicion and after at least attempting to consult with the Director, if available, ask any on-duty employees to submit to an immediate Alcohol and Drug Test provided that:

1. The Director, or designee, should be notified as soon as possible.
2. The employee's Director, or designee, shall immediately notify the Director of Finance and Administration, or a designee, of the determination of Reasonable Suspicion.
3. The employee shall immediately be given a "Test Consent Form" to complete and sign.
4. The employee will be immediately taken by the supervisor, or another supervisor or Management employee, to the appropriate medical facility/clinic for testing.
5. If the employee is not able to be taken to the appropriate medical facility/clinic for testing, the supervisor shall immediately telephone the agency and primary medical facility (any time of the day or night) and/or call medical personnel from the primary medical facility and request that they go to where the employee has been taken to acquire the drug and alcohol test samples.
6. The employee shall immediately be removed from duty and assisted in getting home after the drug and alcohol test.
7. When Reasonable Suspicion is the grounds for requiring a drug/alcohol test, the employee shall be placed on paid administrative leave until the test results are available and a preliminary administrative review has been conducted.
8. An Alcohol and Drug Test for Reasonable Suspicion will include the Urinalysis test.
9. Results from the alcohol and drug screen test will be given by the laboratory to the MRO who, after confirmation, will forward to the Department of Finance and Administration.

Random testing will occur throughout the year and will initially involve a minimum of fifty percent (50%) of the employees/positions requiring a CDL for drug testing and twenty-five percent (25%) for alcohol testing selected at random and unannounced throughout the year. If the test yields a positive result, and the positive result is confirmed by the MRO, the employee will be subject to disciplinary action.

A post accident test will be conducted on any CDL employee involved in a Work-Related Vehicular accident if:

1. The accident results in a loss of life.
2. The operator receives a citation under local or State law for a moving traffic violation arising from the accident.

Any employee returning to duty following a confirmed Positive Test must be subjected to a return-to-duty-test following the same guidelines described in the Pre-employment section. The test must show a verified negative result prior to the employee

returning to duty. Follow-up tests may be used to determine whether or not any controlled substance is still being used.

### **8. REFUSAL TO CONSENT**

A job Applicant who refuses to consent to a drug and alcohol-screening test will be denied employment with **ecomaine**. If the Applicant is a current **ecomaine** employee, the Applicant will be denied employment in the position for which the application was made. No denial shall be made without first attempting to discuss the impact of the refusal with the Applicant.

An employee who refuses to consent to a drug and alcohol screening test when selected for random testing, post accident testing or when Reasonable Suspicion of drug or alcohol use has been identified, is subject to disciplinary action up to and including termination. The reasons for the refusal shall be considered in determining the appropriate disciplinary action. No disciplinary action shall be taken without first discussing the matter with the employee, Director and Director of Finance and Administration.

### **9. CONSEQUENCES OF CONFIRMED POSITIVE TEST RESULTS - DRUGS AND ALCOHOL**

Job Applicants will be denied employment with **ecomaine** if their initial Positive Test results have been confirmed. Applicants who are current **ecomaine** employees shall be denied employment in the position for which application was made. Applicants shall be informed, in writing, if they are rejected on the basis of a confirmed Positive Test result. Employee Applicants shall be handled in accordance with the paragraph immediately preceding this one. The Applicant will be provided an opportunity to discuss with the MRO the results of any Positive Test and seek a second confirmation test.

If an employee's Positive Test result has been confirmed for Drug and Alcohol use, the employee is subject to action as follows:

1. **Positive Drug Test:** The employee shall be referred to a Substance Abuse Professional through **ecomaine's** Employee Assistance Program (EAP). The EAP shall determine what assistance, if any, is needed to resolve problems associated with controlled Substance Abuse, at the employee's cost. Failure to comply with the recommended treatment, if any, however, shall be cause for disciplinary action up to and including termination. Factors to be considered in determining the appropriate disciplinary response include, but are not limited to; the employee's work history, length of employment, current job performance and existence of past disciplinary actions. No disciplinary action shall be taken against any employees who voluntarily identify themselves as a substance abuser prior to the time that it is apparent that the use has been detected. A second Positive Test or further violation of this policy following an initial Positive Test shall be cause for discharge. Prior to any disciplinary action being imposed by **ecomaine**, the employee is entitled to a disciplinary hearing.

2. Positive Alcohol Test: The employee shall be referred to a Substance Assistance Professional through the eomaine Employee Assistance Program (EAP). The Substance Abuse Professional shall determine what assistance, if any, at the employee's cost, is needed to resolve problems associated with alcohol abuse and shall make those recommendations to the employee. Notwithstanding any recommendation made by the Substance Abuse Professional, eomaine may take disciplinary action up to and including termination. Factors to be considered when determining the appropriate disciplinary response include, but are not limited to; the employee's work history, length of employment, current job performance and existence of past disciplinary actions. No disciplinary action shall be taken against any employees who voluntarily identify themselves as an alcohol abuser prior to the time that it is apparent that the use has been detected. A second Positive Test, should the employee continue to be employed following an initial Positive Test, shall be cause for discharge. Prior to any disciplinary action being taken by eomaine, the employee is entitled to a disciplinary hearing.

#### **10. CONSEQUENCES OF A CONTROLLED SUBSTANCE TEST RESULT (DRUG TEST)**

An employee or job Applicant whose drug test yields a positive result, confirmed by the MRO, shall be given a second test. The second test shall use a portion of the same test sample withdrawn from the employee or Applicant for use in the first test.

If the second test confirms the Positive Test result, the employee or Applicant shall be notified of the results by the MRO who will offer the employee or Applicant an opportunity to discuss the results. The MRO will then notify the Director of Finance and Administration in writing. The letter of notification shall identify the particular substance found and its concentration level.

#### **11. CONFIDENTIALITY OF TEST RESULTS**

All information from an employee's or Applicant's drug and alcohol test is confidential and only those with a need to know are to be informed of test results. Disclosure of test results to any other person, agency or organization is prohibited unless written authorization is obtained from the employee or Applicant or upon subpoena. The results of a positive drug test shall not be released by the MRO until confirmed. The records of unconfirmed Positive Test results and negative test results shall be destroyed by the testing laboratory. All Positive Test results will be maintained by the MRO and reported to the Director of Finance and Administration, where they will be kept on file.

#### **12. PRIVACY IN CHEMICAL DRUG TESTING**

Urine samples shall be provided in a private restroom stall or similar enclosure so that employees and Applicants may not be viewed while providing the sample.



Employees and Applicants may be required to disrobe and will be given hospital gowns to wear while they are providing the test samples in order to ensure that there is no tampering. Street clothes, bags, briefcases, purses and other containers may not be carried into the test area. The water in the commode, if any, shall be colored with dye to protect against dilution of test samples.

An employee or Applicant may waive the right to privacy and provide the urine sample in the presence of a witness (of the same gender) and not be required to disrobe and wear a hospital gown.

### 13. LABORATORY TESTING REQUIREMENTS

All chemical drug and alcohol testing of employees and Applicants shall be conducted at medical facilities or laboratories selected by ecomaine. To be considered as a testing site, a medical facility or lab must submit in writing a description of the procedures that will be used to maintain test samples. Factors to be considered by ecomaine in selecting a testing facility include, in addition to NIDA certification:

1. Testing procedures, which ensure privacy to employees and Applicants consistent with the prevention of tampering;
2. Methods of analysis, which ensure reliable test results, including the use of gas chromatography/mass spectrometry to confirm Positive Test results;
3. Chain-of-custody procedures which ensure proper identification, labeling and handling of test samples and;
4. Retention and storage procedures, which ensure reliable results on confirmatory tests of original samples.

The employee or Applicant may request from the MRO a second confirmation test of the same sample within 72 hours of notice that the first test was positive.

The cost of the second confirmation test must be paid in advance by the employee or Applicant. If the test is negative, ecomaine shall reimburse the employee or Applicant for the cost of the test.

The second confirmation test will be performed by a NIDA certified laboratory selected by the MRO.

### 14. RESPONSIBLE ecomaine OFFICIAL

The Director of Finance and Administration or the General Manager of ecomaine may be contacted for further information about this policy or its applicability.

### 15. EFFECTIVE DATE

This policy shall become effective April 8, 1996.

Approved: \_\_\_\_\_ /s/  
Kevin H. Roche, General Manager



## ALCOHOL AND DRUG POLICY

### Preemployment Breath Test and Urinalysis Consent Form

ecomaine has a strong commitment to the health, safety and welfare of its employees, their families, its customers and the public at large; therefore, ecomaine seeks to hire and employ workers requiring a Commercial Drivers License (CDL) who are free from illegal and abused drugs and alcohol, and to protect employees, their families and the public from the adverse effects of alcohol and drug abuse. ecomaine requires the final Applicant selected for a position requiring a CDL to undergo an Alcohol and Drug Test to detect the presence of alcohol and drug abuse substances in the body.

Any Applicant with a positive preemployment test may be denied employment with ecomaine by reason of the Positive Test. Also, any Applicant refusing to be tested will be denied employment.

I UNDERSTAND THAT, AS REQUIRED BY TITLE 49, CODE OF FEDERAL REGULATIONS, ALL APPLICANTS FOR POSITIONS REQUIRING A COMMERCIAL DRIVERS LICENSE MUST BE TESTED FOR THE USE OF ALCOHOL AND CONTROLLED SUBSTANCES AS A PRECONDITION FOR EMPLOYMENT.

I CONSENT TO A BREATH TEST AND A URINE SAMPLE COLLECTION AND TESTING FOR CONTROLLED SUBSTANCES.

I UNDERSTAND THAT A POSITIVE TEST RESULT FOR CONTROLLED SUBSTANCES WILL RENDER ME UNQUALIFIED TO OPERATE A COMMERCIAL MOTOR VEHICLE AND RESULT IN MY BEING DENIED EMPLOYMENT WITH ecomaine.

THE MEDICAL REVIEW OFFICER CONTRACTED BY ecomaine WILL MAINTAIN THE RESULTS OF MY TEST. NEGATIVE AND POSITIVE RESULTS WILL BE REPORTED TO ecomaine. IF THE RESULTS ARE POSITIVE, THE CONTROLLED SUBSTANCE WILL BE IDENTIFIED, THE RESULTS WILL NOT BE RELEASED TO OTHER PARTIES WITHOUT MY WRITTEN CONSENT EXCEPT BY SUBPOENA.

I UNDERSTAND THE ABOVE CONDITIONS AND HEREBY AGREE TO COMPLY WITH THEM.

---

Applicant Name (please print)

Social Security Number

---

Applicant Signature

Date

PLEASE NOTE ANY CURRENT OR RECENT USE OF PRESCRIPTION  
OR OVER-THE-COUNTER MEDICATION IN THE SPACE BELOW:



## ALCOHOL AND DRUG POLICY

### Employee Breath Test and Urinalysis Consent Form

ecomaine has a strong commitment to the health, safety and welfare of its employees, their families, its customers and the public at large. Use and misuse of alcohol or drugs, whether prescribed or illegal, impairs the ability of an employee to perform assigned duties, particularly those requiring a Commercial Drivers License (CDL), and may endanger the employee, co-workers, the public, ecomaine and public and private property. ecomaine seeks to prevent employees from using alcohol and drugs when the use of such is illegal, or in any way endangers ecomaine or the public. ecomaine also wants to provide appropriate and reasonable assistance to employees whose use or misuse of drugs and alcohol impairs their ability to perform their duties.

Under Title 49, Code of Federal Regulations, ecomaine may require a current ecomaine employee, whose position requires a CDL to undergo drug and alcohol testing consisting of Random Testing, post accident testing, Reasonable Suspicion testing and follow up testing. Refusal to be tested may subject an employee to disciplinary action and possible termination.

I UNDERSTAND THAT, AS REQUIRED BY TITLE 49, CODE OF FEDERAL REGULATIONS, ecomaine IS REQUIRED TO ENSURE THAT EMPLOYEES IN SAFETY SENSITIVE POSITIONS ARE TESTED FOR THE USE OF ALCOHOL AND CONTROLLED SUBSTANCES. SUCH TESTS INCLUDE: RANDOM TESTING, POST ACCIDENT TESTING, REASONABLE SUSPICION TESTING AND RETURN TO DUTY AND FOLLOW UP TESTING.

I CONSENT TO A BREATH TEST AND A URINE SAMPLE COLLECTION AND TESTING FOR CONTROLLED SUBSTANCES.

I UNDERSTAND THAT A POSITIVE TEST RESULT FOR CONTROLLED SUBSTANCES WILL RENDER ME UNQUALIFIED TO OPERATE A COMMERCIAL MOTOR VEHICLE AND RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION OF EMPLOYMENT WITH ecomaine.

THE MEDICAL REVIEW OFFICER CONTRACTED BY ecomaine WILL MAINTAIN THE RESULTS OF MY TEST. NEGATIVE AND POSITIVE RESULTS WILL BE REPORTED TO ecomaine. IF THE RESULTS ARE POSITIVE, THE CONTROLLED SUBSTANCE WILL BE IDENTIFIED, THE RESULTS WILL NOT BE RELEASED TO OTHER PARTIES WITHOUT MY WRITTEN CONSENT EXCEPT BY SUBPOENA.

I UNDERSTAND THE ABOVE CONDITIONS AND HEREBY AGREE TO COMPLY WITH THEM.

---

Employee Name (please print)

Social Security Number

---

Applicant Signature

Date

**PLEASE NOTE ANY CURRENT OR RECENT USE OF PRESCRIPTION  
OR OVER-THE-COUNTER MEDICATION IN THE SPACE BELOW:**



CERTIFICATE OF RECEIPT

I hereby acknowledge that I have received a copy of the "Alcohol and Drug Testing Policy and Procedures" of ecomaine and an educational information packet concerning the effects of alcohol and controlled substances use.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Employee's Printed Name

\_\_\_\_\_  
Employee's Social Security Number

**Note: The original of this Certificate must be retained by the Employer and a copy must be given to the Employee.**

ALCOHOL AND DRUG POLICY

Educational Information on the Effects of Drug and Alcohol Use

**ON YOUR SAFETY:**

Alcohol and other drugs interfere with messages to your brain and alter your perceptions, emotions, vision, hearing, and coordination. Alcohol and drugs affect your judgment and can lead to dangerous behavior that puts you at risk for:

- **Accidental injuries.** More than half of drownings and fatal falls are alcohol or drug-related. 45% of emergency room visits are alcohol-related. 80% of patients in special units like burn centers have injuries related to alcohol use. Half of all physical injuries sustained on college campuses stem from alcohol use.
- **Car crashes.** Even small amounts of alcohol make driving unsafe. Drunk driving is not only unsafe, it's illegal. Even a blood alcohol level of .05% (below the legal limit for driving in most states) makes you twice as likely to have a car crash. Almost half of all fatal auto crashes are alcohol or drug related.

Drinking and boating can be a dangerous combination as well. One-third of boating fatalities are alcohol related, and drunk boating is just as illegal as drunk driving.

- **Sexually Transmitted Diseases (STDs) including AIDS.** You are more likely to ignore safety precautions such as condoms if you are under the influence of alcohol or other drugs.
- **Unwanted pregnancy.** For the same reasons that alcohol and other drugs put people at greater risk for STDs, it also makes pregnancy a risk of substance abuse.
- **Sexual assault.** When you're intoxicated, impaired judgment can stop you from noticing dangerous situations and people. Slowed thinking and reaction time makes you more vulnerable to being forced into sexual activity. It also makes people less likely to notice when they are hurting others. Alcohol is involved in many acquaintance rapes. Either party being drunk is not a legal excuse for assault.
- **Fights.** Barroom brawls don't just happen in movies. Not only can you get hurt, you can get arrested.
- **Trouble with the law.** Illegal drugs, underage drinking, drunk driving, public consumption--even giving guests alcohol--can get you into legal trouble.

## ON YOUR HEALTH:

### Alcohol

Alcohol goes directly into the bloodstream, physically affecting the whole body. Some illnesses and health problems caused by alcohol include:

- **Hangovers.** Headaches, nausea, vomiting, aches and pains all result from drinking too much. Drinking to the point of drunkenness makes you sick.
- **Weight gain.** Alcohol is not water. A beer has about 150 "empty" calories that provide few if any nutrients.
- **High blood pressure.** Along with being overweight, high blood pressure is associated with many serious health problems.
- **Depressed immune system.** Impaired immunity makes you more likely to contract viral illnesses such as flu and infections.
- **Cancer.** 2-4% of all cancer cases are related to alcohol. Upper digestive tract cancers are the most common, hitting the esophagus, mouth, larynx, and pharynx. Women who drink prior to menopause are more likely to develop breast cancer. Your risk of skin cancer doubles if you drink slightly more than "moderate levels." Some studies implicate alcohol in colon, stomach, pancreas and lung cancer. And let's not forget the liver...
- **Liver disease.** Heavy drinking can cause fatty liver, hepatitis, cirrhosis and cancer of the liver. The liver breaks down alcohol at the rate of only one drink per hour.
- **Alcohol poisoning.** Drinking large amounts can result in alcohol poisoning, which causes unconsciousness and even death. Breathing slows, and the skin becomes cold and may look blue. Don't let a person in this condition "sleep it off." Call 911.
- **Heart or respiratory failure.** Excessive drinking can have serious results. Heart or respiratory failure often means death.

Other long-term effects of heavy alcohol use include loss of appetite, vitamin deficiencies, stomach ailments, sexual impotence, central nervous system damage, and memory loss.

Finally, let's not forget alcoholism. Alcoholism is a disease to which some people seem predisposed. Alcoholics are unable to control their drinking--how much, when, and if. Alcoholism puts you at great risk for other health problems, and it can shorten your life by more than 10 years. Alcoholism cannot be cured, but it can be treated. Through education, treatment, and self-help support such as AA, people can learn to live alcohol-free and feel good.



## Drugs

Like many prescription drugs, "recreational" drugs come with potentially harmful side effects that can have serious and long-term effects on your health.

High doses of many of the drugs, or impure or more dangerous substitutes for these drugs, can cause immediate life-threatening health problems such as **heart attack, respiratory failure, and coma**. Combining drugs with each other or with alcohol is especially dangerous.

- Barbiturates and tranquilizers are commonly abused prescription drugs. They can cause **hangover-like symptoms, nausea, seizures, and coma**. Overdose or mixing these drugs with alcohol can be fatal.
- Cocaine can cause such long-term problems as tremors, seizures, psychosis, and heart or respiratory failure.
- LSD can cause nausea, rapid heart rate, depression, and disorientation. Long-term effects include **paranoia and psychosis**.
- Marijuana and hashish can cause rapid heart rate and memory impairment soon after use. Long-term effects include cognitive problems, infertility, weakened immune system, and possible lung damage.
- Narcotics such as heroin can bring on respiratory and circulatory depression, dizziness, impotence, constipation, and withdrawal sickness. Overdoses can lead to seizures and death.
- PCP, in addition to triggering unpredictable and violent behavior, can cause dizziness, numbness, high heart rate and blood pressure, convulsions, and in high amounts **fatal heart and lung failure or ruptured blood vessels**.
- Stimulants such as amphetamines have health effects that include high heart rate and blood pressure, headache, blurred vision, dizziness, impotence, skin disorders, tremors, seizures, and psychosis.

## ON YOUR LIFE:

Substance abuse and addiction can seriously affect one's life in school, at work, and in relationships.

- **Poor school performance.** Studies show that grades go down as alcohol consumption increases. The average student who has one drink a day earns a GPA of only a C-level. Greater usage is associated with failing grades. 30% of academic problems stem from alcohol misuse.

- **Poor work performance.** People with substance abuse problems miss more work days, are less productive, have more problems with their bosses, and make more mistakes--including on-the-job injuries.
- **Relationship trouble.** Substance abuse puts a strain on relationships. Problem drinkers tend to change social circles often and are unable to maintain long term friendships. They alienate themselves from others to hide their excessive consumption.
- **Personality changes.** Drastic personality changes can result from drinking or using drugs. A normally quiet person may become boisterous or obnoxious, even violent, under the influence of alcohol and other drugs. Marijuana has been linked to "amotivational syndrome" in which people lose interest in their jobs, friends, and lives. Drugs such as cocaine, amphetamines, and LSD can cause psychosis.



## WASTE AND RECYCLABLE MATERIAL REMOVAL POLICY

July 01, 2008

It is expressly forbidden for any person to take, remove or use waste or recyclable materials from any ecomaine facilities or property for any use other than for the benefit of ecomaine. It is expressly forbidden for any ecomaine employee, customer or visitor to take, remove or use any such material for their personal use or benefit. This work rule applies to ALL ecomaine sites including, but not limited to, the recycling facility, the tipping hall, the waste-to-energy plant and the ashfill/balefill. If any employee is found to be engaging in or benefiting from, or allowing another person to engage in or benefit from, violation of this work rule such violation will be considered to be theft of ecomaine property and will be treated accordingly.

Violation of this work rule will result in the following progressive disciplinary steps being taken:

- |             |  |
|-------------|--|
| 1st offense | Up to two hundred forty (240) hours suspension without pay or termination of employment. |
| 2nd offense | Up to and including termination of employment.   |



## SMOKING POLICY

07/01/08

Smoking is permitted only in the 2<sup>nd</sup> floor lunch area smoking room in the Waste-to-energy Plant located at 64 Blueberry Road, Portland and outdoors at the Recycling Facility, the Waste-to-energy Plant and the Landfill as indicated on the attached photos. Smoking anywhere else inside or outside any ecomaine Facility is prohibited.

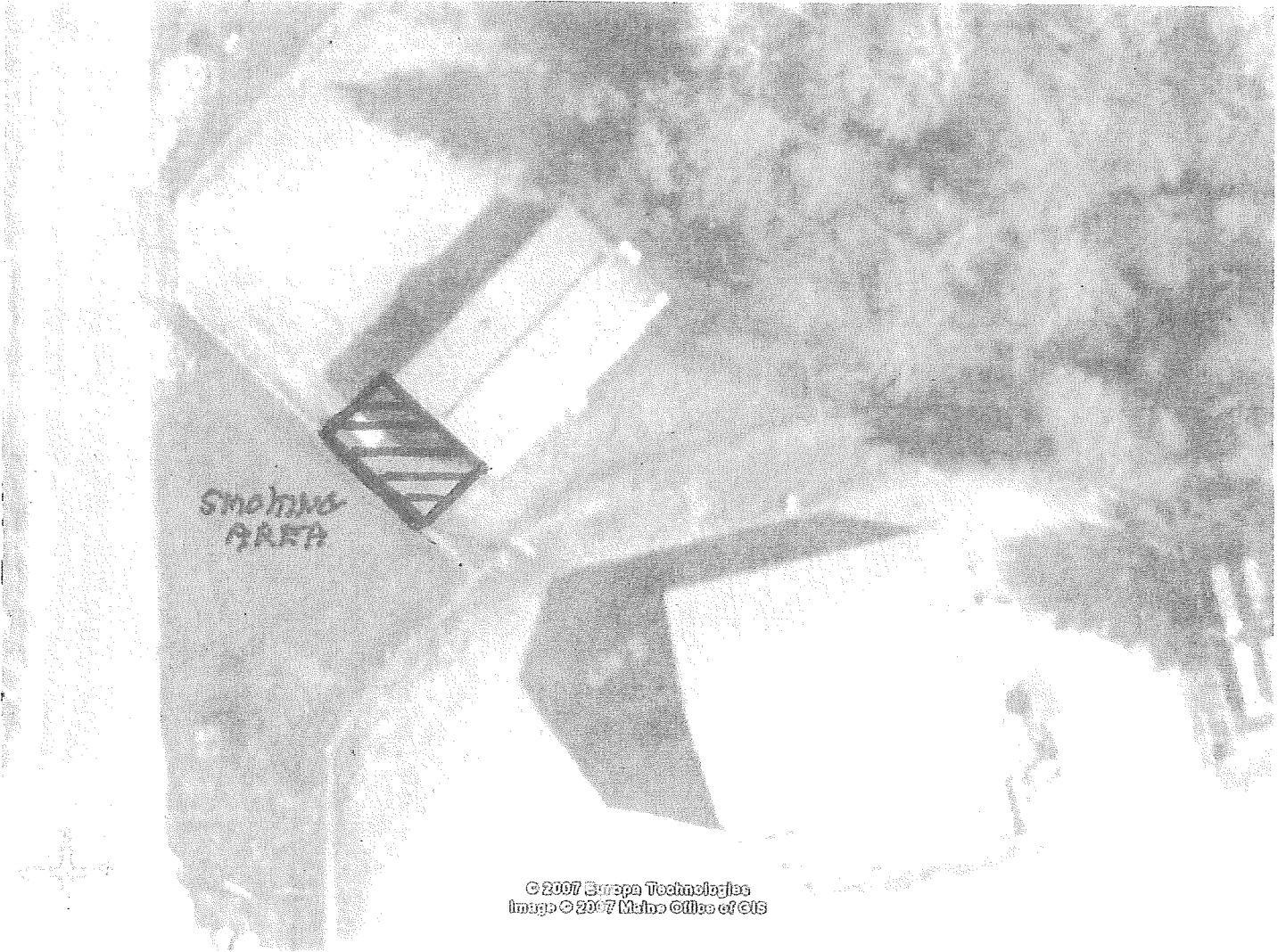
Facility is defined to include all ecomaine buildings, structures, equipment and motor vehicles.

If an ecomaine employee is found to be in violation of this Smoking Policy, the following progressive disciplinary steps will be taken:

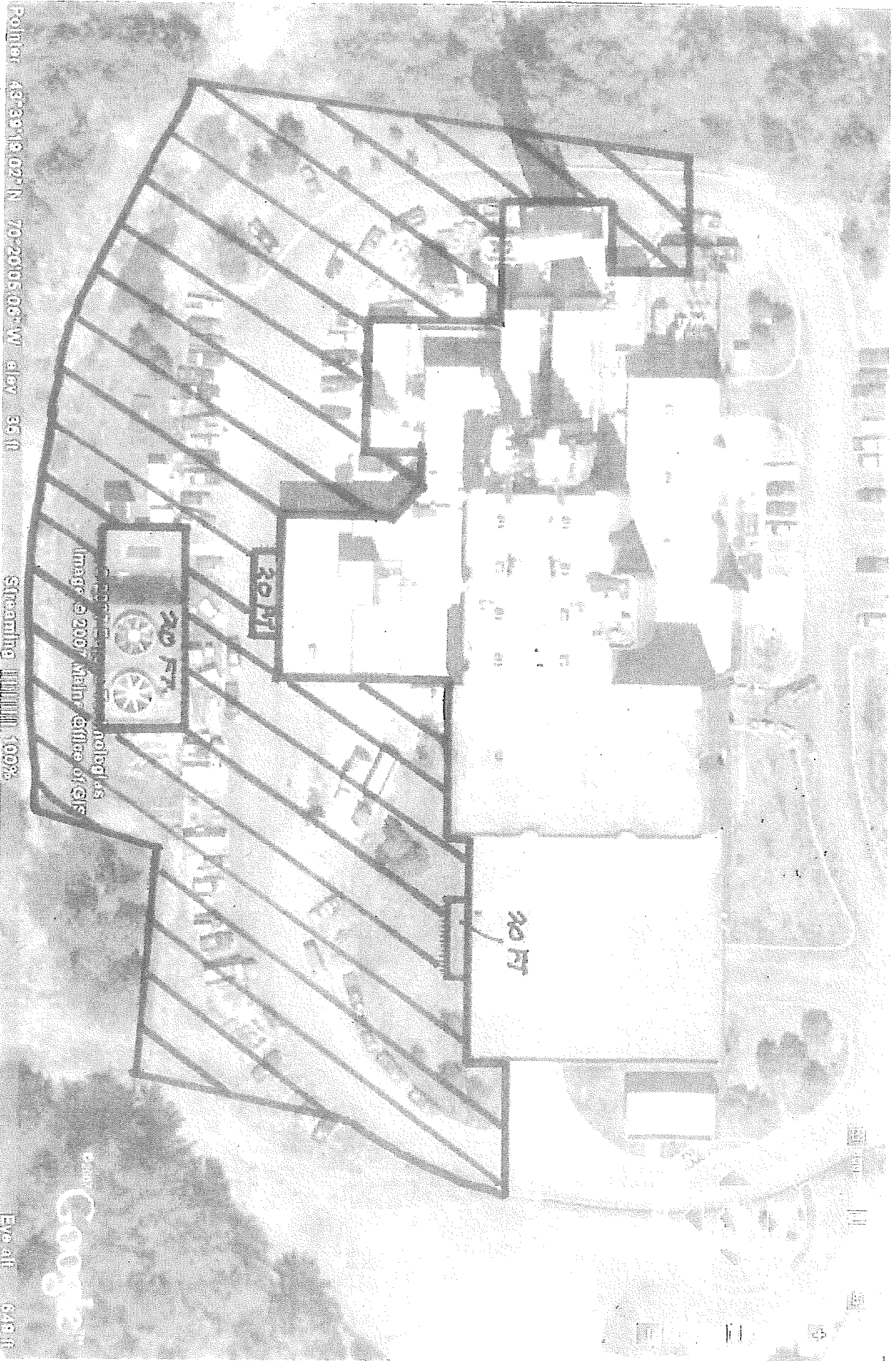
1<sup>st</sup> offense – Up to thirty days suspension, without pay.

2<sup>nd</sup> offense – Up to and including termination of employment.





Landfill Facility



Pollner 43°39'18.02"N 70°20'06.06"W elev 35 ft

Streeting 100%

Image © 2007 Main Office of GIS

Google  
Eye alt 64910

Waste-to-Energy Facility



## RELATIVE AND PERSONAL RELATIONSHIPS POLICY

07/01/08

Individuals who are relatives, whether related by blood or marriage, are not permitted to work at ecomaine. For purposes of this Policy, "relative" is defined as a "spouse, child, parent, sibling, grandparent, grandchild, aunt, uncle, niece, nephew, cousin or corresponding 'great', in-law or 'step' relation".

Because personal relationships may create an actual or perceived conflict of interest, supervisors may not hire, promote or directly supervise any person with whom they have a personal relationship; nor may they engage in any personal relationships with their subordinates.

A personal relationship includes, but is not limited to, the following activities: dating, engagement, marriage, sharing the same household or living together.

This Policy applies to all job categories, for regular full time employees.

This Policy is effective July 01, 2008. Any employment of relatives at ecomaine that would violate this policy, which existed before the effective date of the Policy, shall be grandfathered.





## ETHICS POLICY

### POLICY CONCERNING ELECTRONIC COMMUNICATIONS

07/01/08

ecomaine provides certain employees with access to the Internet and to ecomaine-owned telephones, computers, facsimile machines, copy machines, voicemail, e-mail, word processing, and other electronic communication or data storage systems, for their use in carrying out the business of ecomaine. ecomaine expects all employees to conduct their use of all electronic systems in a professional, responsible and courteous manner and as provided in this Policy. In this Policy, the following words have the following meanings:

1. The word "System" means all telephones, computers, facsimile machines, copy-machines, voicemail, e-mail, word processing, and other electronic communication, copying or data storage systems leased, owned or in the possession of ecomaine. The "System" includes, but is not limited to, any ecomaine network computer system, as well as any local personal computer, any floppy-disk, any hard-drive and any other storage device or medium that ecomaine provides to an employee or which is connected (either physically or electronically, and either directly or indirectly) to any other part of the System.
2. The word "Communication" means all electronic communications, all data, all software, all files and all other information made upon, created by or upon, received or transmitted by, or stored upon, any part of the System. "Communications" include, but are not limited to, voicemail and e-mail messages, Internet usage and all information placed upon the System.

The following policy relates to the System and all Communications:

1. All parts of the System are ecomaine property and/or are provided solely for business use and for ecomaine Communications. Occasional use of parts of the System by employees for personal matters will be permitted, if kept to reasonable frequency and duration. ecomaine will be the sole judge of such reasonableness. Personal telephone, e-mail and internet use should be of short duration and infrequent during regular work hours. Employer issued cell phones may be used for personal calls during off hours so long as the employee reimburses ecomaine for any additional costs incurred as a result of the personal use. All long distance charges for personal calls must be reimbursed to ecomaine and are the responsibility of the employees to track. Personal e-mails requiring lengthy responses should be sent to the employees' home e-mail addresses. All Communications are ecomaine property as well. ecomaine has the right and the ability to monitor all Communications, including, but not limited to, Internet usage, all voicemail messages, all e-mail messages, all electronic files, all software, all data, and all other information. ecomaine may monitor and review the content of any of the above at any time and for any purpose whatsoever.

2. An employee may not use ecomaine's System or send, receive, create or store Communications upon the System in a manner that is disruptive to others, that is harmful to morale, or that interferes with the work duties of that employee or others. All employees are prohibited from downloading, obtaining, displaying, storing, receiving or transmitting any: (a) sexually-explicit or obscene messages or images; (b) communications containing libelous or defamatory material; (c) ethnic, racial or religious slurs; or (d) anything that is, or may be construed as, disparagement or harassment of others based on race, national origin, gender, sexual orientation, age, disability, religious or political beliefs, or any other basis prohibited by law or by ecomaine policy or practices. Neither the System nor any Communication may be used to solicit ecomaine employees, or any other individual, for any commercial, religious, charitable, or political causes, outside organizations, or any other non-ecomaine matter. The System should not be used for any purpose that is not related to ecomaine business. ecomaine endorsed programs, including but not limited to, programs such as United Way or Red Cross blood drives; are excluded from this prohibition.
3. E-mail, voicemail, data, Internet usage, and other Communications remain subject to review at any time and for any reason, even though an employee classifies Communications as "personal", "confidential" or "private". Provision of a password or other similar method or device to an employee, or use of the same, shall not in any way mean that ecomaine is giving up its right to review any Communications. ecomaine also retains the right to identify, delete and modify any Communications at any time.

When an employee leaves the employ of ecomaine for any reason, ecomaine reserves the right to review and retain all Communications, (including, but not limited to, e-mail, voicemail and computer files) have or relating to the departing employee for any reason. Any employee who leaves the employ of ecomaine shall not delete, modify, take or retain any Communications (including, but not limited to, e-mail, voicemail, software and computer files). Employees are prohibited from gaining, or attempting to gain, access to another employee's e-mail or computer files without the employee first obtaining authorization from a supervisor or designated ecomaine official.

5. Neither software nor other items may be downloaded or placed upon any part of the System by an employee without prior approval by appropriate ecomaine personnel. No employee shall violate any copyright or other law when downloading or placing software or other items upon any part of the System or when disseminating materials found on, or otherwise obtained by using, any part of the System.
6. This policy is not a contract and may be changed or eliminated by ecomaine at any time.



ETHICS POLICY  
POLICY REGARDING ACCEPTANCE OF GIFTS

07/01/08

No Board member or employee of ecomaine shall:

1. Accept or receive from any person, firm or corporation doing, or attempting to do, business with ecomaine any free property, product, material or service; or accept from any person, firm or corporation doing, or attempting to do, business with ecomaine any property, product, material or service at terms more favorable than those granted to the general public. This prohibition does not include promotional/advertisement items such as mugs, hats, shirts etc that are marked with a company logo and are not valued at more than \$45.00 or holiday gifts such as food that are shared amongst all employees.
2. Purchase or accept anything from ecomaine, other than those items or services which are offered to the general public, and then only upon the same terms and under the same procedures offered to, and used for, the general public. This does not include those items or services that are received as compensation, part of an employment contract or which are necessary for the performance of an employee's duties.

Gifts given by ecomaine, in recognition of service to ecomaine, are not prohibited by this policy.

ecomaine

Memorandum  
From Rocco Marzilli, Jr.  
Director of Finance and Administration

To: All ecomaine Staff

Date: July 1, 2007

Re: Travel

Please find attached a newly instituted form to be used for the purposes of providing a detailed recap of staff travel on ecomaine business.

The new form is entitled "Itemized Recap and Request for reimbursement of Traveling Expenses" and should be used to report all expenses of any trips, including those that involve just mileage, meals or and/or tolls. This form will replace the existing form entitled "Itemized Statement of Traveling Expenses and Reimbursement Request" and is intended to recap all expenses by date; that is, one line for each day of the trip, for any trips that require and overnight stay of one night or more. The form must be completed and turned in, along with all required receipts and any balance of money advanced, within five days of returning from the trip in order to get reimbursement. Except for very rare cases, all expenses require that receipts be turned in as documentation for that expense. The "Itemized Recap ...." should include ALL expenses, including those that were paid for by credit card and/or by accounts payable check as well as those for which reimbursement is being requested.

For non-overnight trips involving only mileage, meals and/or tolls, the form can be turned in for reimbursement monthly, as we now do with the form being replaced.

If you have any questions, please let me know.

Thank you,





ETHICS POLICY  
POLICY REGARDING USE OF COMPANY PROPERTY

07/01/08

This policy applies to all ecomaine Employees, Visitors, Customers and Contractors

Policy

It is the policy of ecomaine NOT to allow the use or borrowing of company property for personal use. The only acceptable uses of company property are specifically defined in this policy. Additional information regarding personal use of ecomaine electronic communications equipment may be found in the policy entitled "ecomaine Policy Concerning Electronic Communications".

Examples of prohibited activities on or off company paid time include:

- Borrowing company tools for projects at home
- Using ecomaine facilities to make personal automobile repairs
- Using company tools at any ecomaine facility or grounds to work on any personal projects
- Using company vehicles for personal business or errands

Acceptable Activities:

- Unavoidable road side type repairs to personal automobiles that would otherwise leave the individual stranded. Example (changing a flat tire) while off company paid time and in designated parking areas
- Borrowing of ecomaine property under emergency conditions with approval of the General Manager
- Using company vehicles while on company paid time for personal business or errands, if directly on the route being traveled for company business and only if of very short duration

Compliance

All ecomaine Employees, Visitors, Customers and Contractors are expected to comply with this policy. Failure to follow this policy will result in immediate action up to and including discharge.

Annual Employee Performance Evaluation

Employee:

Period Covered:

Position:

Department:

Evaluator:

---

**EMPLOYEE OBJECTIVES FOR THE PERIOD INDICATED ABOVE:**

For the choices provided, select the appropriate rating from the drop-down menu (choices are "Did not meet", "Partially met", "Met", "Exceeded" or "Exceptional"). Review objectives below, which were determined during the previous evaluation and evaluate to what extent they were achieved during the above indicated period. Identify all factors that may have allowed the objective to be met, or may have caused the objective to not be met.

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

**Goals:**

**Accomplishments:**

**Evaluator Comments:**

Rating: Select

---

### EMPLOYEE PERFORMANCE IN KEY AREAS

This section to be used to describe employee performance, for the period indicated at the top of the first page, in specific skill areas. For the choices provided, select the appropriate rating from the drop-down menu (choices are "Not applicable", "Did not meet", "partially met", "Met", "Exceeded" or "Exceptional") and provide comments as appropriate.

---

**Communication:**

Communicates well, both verbally and in writing.

Rating: Select

Produces accurate and timely reports.

Rating: Select

Delivers effective presentations and/or briefings.

Rating: Select

Shares information and ideas with others.

Rating: Select

Has good listening skills.

Rating: Select

**Comments and suggestions:**

---

**Initiative:**

Takes on work related problems.

Rating: Select

Seeks additional responsibilities.

Rating: Select

Recognizes and acts on opportunities.

Rating: Select

Generates new ideas and initiates action.

Rating: Select

Practices self development.

Rating: Select

Works additional hours to meet job demands.

Rating: Select

Takes the initiative to resolve challenges.

Rating: Select

Takes the initiative to include others.

Rating: Select

**Comments and suggestions:**

---

**Job knowledge:**

Understands job duties and responsibilities.

Rating: Select

Has necessary job and technical skills and knowledge.

Rating: Select

Understands and promotes company missions and values.

Rating: Select

Keeps current with new developments.

Rating: Select

**Comments and suggestions:**

---



---

**Dependability:**

Meets commitments.	Rating: Select
Builds an appropriate bank of Paid Leave or Sick Time.	Rating: Select
Accepts accountability.	Rating: Select
Handles change.	Rating: Select
Stays positive and focused under pressure.	Rating: Select
Meets attendance requirements and works beyond required work schedule.	Rating: Select
<b>Comments and suggestions:</b>	

---

**Interpersonal skills:**

Builds effective relationships with fellow staff.	Rating: Select
Has good listening skills.	Rating: Select
Seeks feedback and constructive criticism.	Rating: Select
Networks and builds work related relationships.	Rating: Select
Is flexible and open-minded.	Rating: Select
Negotiates effectively.	Rating: Select
Is a good team player.	Rating: Select
<b>Comments and suggestions:</b>	

---

**Productivity:**

Manages assigned, reasonable workload.	Rating: Select
Takes on additional responsibilities as needed.	Rating: Select
Manages priorities.	Rating: Select
Develops and follows clearly defined work procedures.	Rating: Select
Manages time well.	Rating: Select
Handles information flow.	Rating: Select
Carefully manages expenses and budgets.	Rating: Select
<b>Comments and suggestions:</b>	

---

**Organization:**

Completes assignments & duties as assigned.	Rating: Select
Comes prepared for meetings.	Rating: Select
Follows through with action items.	Rating: Select
Keeps information organized and accessible.	Rating: Select
Maintains clean and functional work space.	Rating: Select
Prioritizes tasks and manages work flow.	Rating: Select
Manages time well.	Rating: Select
Able to manage multiple projects or tasks.	Rating: Select
<b>Comments and suggestions:</b>	

---

**Supervision:**

Expects high levels of performance.	Rating: Select
Maintains safety as a priority.	Rating: Select
Recognizes and reinforces outstanding performance and initiates feedback.	Rating: Select
Displays vigor and enthusiasm for work.	Rating: Select
Is respectful and fair.	Rating: Select
Strives to improve employee morale.	Rating: Select
Communicates effectively with staff.	Rating: Select
Supports management goals and objectives.	Rating: Select
Takes on new projects and responsibilities.	Rating: Select

---

OVERALL PERFORMANCE SUMMARY

Summary of overall achievement and performance:

Rating: Select

Evaluator Comments:

---

Final evaluator suggestions:

---

EMPLOYEE COMMENTS:

---

Signature of evaluator: \_\_\_\_\_

Date:

Signature of employee: \_\_\_\_\_

Date:

---

Evaluators' supervisor:  
Comments and suggestions:

Signature: \_\_\_\_\_

Date:



## EMERGENCY NOTIFICATION AND COMMUNICATION PROCEDURE

07/01/08

### Purpose

The purpose of this procedure is to ensure that the appropriate level of management is notified in the event of an emergency in order to provide direction or make decisions necessary to mitigate adverse impacts to business during or after an emergency at any of the ecomaine facilities.

### Responsibility

All ecomaine non-union and management staff are responsible for keeping the ecomaine General Manager informed of system emergencies. The General Manager is responsible for notifying and responding to members of the ecomaine Board of Directors and the media.

### Background

ecomaine recognizes the potential for an emergency situation to emerge that causes ecomaine to take action to mitigate adverse impacts to its business. Emergencies conditions include: incapacitating fires, serious or fatal employee injuries, and critical failures of systems or equipment that would require ecomaine to react to mitigate business interruption or respond to the media.

### Procedure

The normal dissemination of information follows the chain of command from Employee to Supervisor or Superintendent to Director to General Manager. The General Manager is responsible for determining the need for notification to the ecomaine Chairman, Board of Directors and the media. The normal chain of command will also apply to emergency conditions.

In the event that the General Manager cannot be contacted, the Director of Finance and Administration or the Chief Engineer shall assume the responsibilities of the General Manager.

In the event that the General Manager, Director of Finance and Administration and Chief Engineer cannot be contacted, The Environmental Manager in conjunction with the on site Shift Supervisor (in the case of the Waste-to-energy Facility), the Recycling Supervisor (in the case of the Recycling Facility) and the Landfill Supervisor (in the case of the Ashfill Balefill Facility) shall assume the responsibilities of the General Manager.

**Emergency Contact Numbers**

**Kevin Roche**

Home 207-642-2090  
Cell 207-899-7943  
Other 207-807-3585

**Kevin Trytek**

Home 207-345-3821  
Cell 207-899-7941  
Other 207-689-4021

**Rocco Marzilli, Jr.**

Home 207-839-6308



## EMPLOYEE USE OF ecomaine DISPOSAL FACILITIES POLICY

07/01/08

It is the policy of ecomaine to allow its Employees to dispose of their own personal garbage at the Waste-to-energy facility at no cost. This policy has been accepted by the ecomaine Board of Directors at its July 14<sup>th</sup>, 2005 board meeting.

Employees are expected to follow all of the ecomaine acceptable waste criteria and handling procedures. This policy does not allow employees to dump trash generated from any place except their own residence. Any trash generated from any other residence or any commercial trash should be charged at the regular tipping fee, including trash generated from side businesses, apartments, construction sites or any other non residential origin. Violation of this policy will result in disciplinary action. All employees are asked for their cooperation in using this policy.



Employee Acknowledgment  
(To be retained by the Company)

This certifies that I have received the ecomaine Personnel Manual (dated July 01, 2008), containing the items listed below, outlining ecomaine's policies, rules and general information.

1. Family and Medical Leave Policy
2. Policy Against Harassment
3. Alcohol and Drug/CDL Policy
4. Waste and Recyclable Material Removal Policy
5. Smoking Policy
6. Relative and Personal Relationships Policy
7. Ethics Policies
  - a. Electronic Communications
  - b. Acceptance of Gifts
  - c. Travel
  - d. Use of Company Property
8. Employee Evaluations
9. Emergency Notification and Communication Procedure
10. Employee Use of Disposal Facilities
11. Employee Acknowledgement

---

Employee's signature

---

Date



**Non-union Personnel Policy**

**Dated: July 01, 2008**



## Statement of Non-union Personnel Policy July 1, 2008

The following Personnel Policy has been approved by the Board of Directors of ecomaine for use by the General Manager of ecomaine in the administration of personnel activities for non-union ecomaine employees.

### 1. Purpose of Policy

This policy sets forth the principles and procedures which will give reasonable assurance to ecomaine and its non-union employees that personnel problems will be dealt with on an equitable basis, that proper employee morale will be preserved, and that ecomaine shall realize the benefits and advantages of a competent staff. ecomaine always reserves the right to manage its employees. All references to masculine gender as used in this policy statement are intended to include both male and female.

### 2. Employment

A Regular Employee is defined as an employee, in a position listed in Attachment A, who is salaried or hourly and scheduled to work an average of at least forty (40) hours per week, year round. All references to employee in this Personnel Policy shall mean Regular Employee as defined above.

ecomaine shall employ, without discrimination based on sex, race, color, national origin, religion, age, sexual orientation or physical or mental disability, the best qualified persons who are available at the wage/salary levels established for employment. Within the limits of time during which a position must be filled, there shall be as complete and thorough a search for qualified candidates as is practical.

The character of this search will vary from position to position, but may include advertising, departmental notice, open competitive examinations, contact with State and other employment offices, and contact with special sources of information in each case. All new employees hired to fill a regular position must serve an initial six (6) month probationary period. The purpose of such probationary period shall be to evaluate the new employee's work habits, interest in ecomaine and overall suitability to the job. An employee may be terminated at any time during the probationary period at the discretion of the General Manager. A person who is hired to work on a full-time basis for a temporary period of time, and who is subsequently appointed to Regular Employee status, shall have such temporary time credited towards their probationary period.

ecomaine may require a pre-employment physical exam by a physician chosen and paid by ecomaine. As a condition of continued employment by ecomaine, ecomaine may require a physical exam when it deems that such exam is necessary for the well being of the employee, of other employees or for the effective operation of ecomaine.



### 3. Seniority

All new employees are on probation for the first six (6) months of employment. During the probationary period, an employee may be terminated by ecomaine at any time and for any reason without recourse to the grievance procedure. If an employee is retained at the end of the probationary period, his/her seniority will be based on his/her first date of employment. Upon promotion, lateral transfer or voluntary demotion, an employee shall be on probation for sixty (60) days. If an employee fails to qualify in such a position or chooses to return to his/her former position, he/she shall be entitled to return to his/her former position within the sixty day period. Any employee filling a vacancy created by such a promotion, lateral transfer or voluntary demotion shall also be entitled to return to his/her former position when the employee returns to his/her former position in accordance with the above provision.

Seniority shall be lost for the following reasons:

- (a.) When an employee voluntarily leaves the employ of ecomaine.
- (b.) When an employee is discharged for just cause and the cause is not challenged or is sustained after being challenged.
- (c.) When an employee is laid off and not recalled for work within two (2) years from the date of layoff.
- (d.) When an employee who has been laid off is notified to return to work by registered mail, return receipt requested, to his/her last known address and he/she fails to notify ecomaine of his/her intent to return within five (5) days from the date of receipt of the letter or fails to report for work within two (2) weeks after notifying ecomaine.

### 4. Layoff and Recall

In the event ecomaine determines that a reduction in employee positions is necessary, probationary employees within that position shall be laid off first without regard to their individual periods of employment. Non-probationary employees within that position with the least seniority shall be the next to be laid off; provided however, that any such employee so laid off shall be permitted to return to a position which was previously held by such employee and which such employee is qualified to fill at the time of layoff.

Whenever a vacancy occurs in a position, employees who are on layoff in that position shall be recalled in the reverse order in which they were laid off. If the number of employees to be recalled within the position exceeds the number of employees then on layoff from that position, employees then on layoff from another position shall be recalled providing that they are qualified to perform the work for which they are recalled. ecomaine shall notify employees on layoff of a recall by written notice sent registered mail, return receipt requested. If an employee fails to notify ecomaine of his/her intent to return five (5) days from receipt of the written notice or fails to report for work within two (2) weeks after notifying ecomaine, said employee shall lose all rights to recall.

## 5. Promotion

ecomaine desires that employees be granted maximum consideration for advancement within the organization; therefore, all vacancies shall be posted. Employees shall be given first consideration in filling a vacancy and may be given training opportunities to qualify for promotion, but it is recognized that from time to time the best interest of ecomaine may require that a vacancy be filled by a person not employed by ecomaine. Such a decision shall be made only after a careful review of the qualifications of all ecomaine employees who have applied for the position.

## 6. Training

ecomaine believes that the operation of its solid waste programs will benefit by providing for, and encouraging its employees to participate in, advanced job related educational and training programs. ecomaine shall provide, within its budgetary capabilities, educational and training opportunities for its employees. Such opportunities may, at the discretion of the General Manager, be mandatory. The General Manager shall make the final decision as to which individual, or individuals, shall be given the opportunity to participate in a training or education programs.

ecomaine will reimburse employees for tuition, books and supplies as follows:

Grade of A	100% of costs
Grade of B	75% of costs
Grade of C	50% of costs
Grade of D or lower	None
Mandatory training will be fully paid by ecomaine.	

## 7. Compensation

Subject to approval by the Chair and Vice Chair, the General Manager shall fix wages and salaries of employees on a basis that is commensurate with wages and salaries for comparable work in the area and that will attract and retain well-qualified employees.

## 8. Work Hours

All salaried employees are expected to work the necessary hours required to complete their duties.

## 9. Overtime

Due to the nature of the ecomaine programs, the General Manager or his designee may authorize necessary overtime work in order to fully meet the operational needs of ecomaine.

Complete records of overtime for the employees of ecomaine shall be maintained.

When a non-salaried employee is required to work more than forty (40) hours per week, he or she shall be compensated at a monetary rate of one and one-half (1-1/2) times the current hourly rate for all hours worked in excess of forty (40) hours.

For purposes of this section, "Hours Worked" shall mean only the following:

1. Hours actually worked.
2. Hours compensated for by holiday base pay.

#### 10. Paid Leave

Employees shall accrue Paid Leave at the rates set forth in the following schedule, to the maximum of nine hundred sixty (960) hours. Any accrued Paid Leave time exceeding 960 hours that is unused will be automatically cashed in by employee on the last payroll of the fiscal year so that no more than 960 hours will be carried over to the next fiscal year. Paid Leave privileges are available only to Regular Employees as defined in Section 2. The schedule is as follows:

Length of service	Paid Leave Time
Up to 4 years	18.00 hours per month
5 years - 9 years	21.33 hours per month
10 years or over	24.67 hours per month

#### For Employees Hired After September 1, 2005

Length of service	Paid Leave Time
Up to 4 years	13.33 hours per month
5 years - 9 years	16.67 hours per month
10 years or over	20.00 hours per month

It is expected that employees will utilize Paid Leave in a reasonable manner. Abuse of this policy shall be sufficient reason for terminating an employee.

The month in which employment begins or ends will be counted as a month of service if the employment begins before the 16<sup>th</sup> or ends after the 15<sup>th</sup> day of the month.

Paid Leave may be used, with the approval of the appropriate Director, for the following purposes:

- a. Vacation.
- b. Personal illness or illness of family members. Employees are eligible for Workers' Compensation for a service connected injury and may elect to take earned Paid Leave in addition to Workers' Compensation to the extent that it provides full regular pay and to the extent of earned Paid Leave.

All employees must use at least 50% of their annually accrued amount of paid leave each fiscal year, beginning in the first full fiscal year of employment. All employees, with authorization from the General Manager, may be paid, at their regular rate of pay, for up to four (4) weeks of Paid Leave each fiscal year if they have accrued such time above the mandatory usage.

Unused Paid Leave shall be paid upon termination, up to a maximum of nine hundred sixty (960) hours.

#### **11. Bereavement Leave**

After notification to their supervisor, employees shall be excused from work for up to three (3) days because of death in the immediate family, as defined below, and shall be paid the regular rate of pay for the scheduled work hours missed. Immediate family is defined to mean spouse, parents, children, brothers, sisters, mother-in-law, father-in-law, brother-in-law, sister-in-law, grandfather, grandmother, grandchildren, step-father, step-mother, step-children or other relatives in the same household of the employee.

#### **12. Funeral Leave**

After notification to their supervisor, employees shall be excused from work for up to one (1) day for attendance at the funeral of relatives not included in their immediate family. The employee shall be paid their regular rate of pay for the scheduled work hours missed.

#### **13. Jury/Witness Duty Pay**

ecomaine shall pay an employee called for jury duty or as a subpoenaed witness to a case (wherein the employee is not a plaintiff or defendant) the difference between the number of hours of work missed times their regular pay and the juror's pay or witness fee, upon presentation of an official statement of pay received. Employees are expected to be at work on days they are not needed in court. When employees are released early from court, they are required to report for work if they are available to work two (2) hours or more of their schedule for that day. Employees must call their Supervisor daily to advise them of their court schedule.

#### **14. Family Medical Leave**

An employee who has been employed by ecomaine for twelve (12) consecutive months is entitled to an unpaid family medical leave of up to twelve (12) consecutive work weeks in any two (2) year period for the birth of an employee's child, the adoption of a child sixteen (16) years of age or less, or the serious illness of the employee, child, spouse or parent. Serious illness means an accident, disease or condition that: (1) poses imminent danger of death; (2) requires hospitalization involving an organ transplant, limb amputation or other procedure of similar severity; or (3) any mental or physical condition that requires constant in-home care.

## 15. Reserve Service Leave

Employees who are members of the organized military reserves, and who are required to perform field duty, will be granted Reserve Service Leave, in addition to vacation leave, but such Reserve Service Leave shall not exceed two (2) weeks in any fiscal year. For any such period of Reserve Service Leave, ecomaine will pay the difference between total service pay for such field duty and the employee's regular pay, the sum of both payments to equal the regular compensation for the employee had he/she been working during the period of leave. The employee using Reserve Service Leave shall furnish the General Manager with an official statement of Reserve Service pay received.

## 16. Leave Without Pay

A Regular Employee may be granted a leave of absence without pay by a Director, in writing, and with the written approval of the Director of Finance and Administration for up to five (5) days. Any employee requesting a leave of absence must submit the request, in writing, to the Director stating the anticipated length of the leave of absence and the reason for the leave. Requests for a leave exceeding five (5) days may be granted only by the General Manager and such written requests must be submitted to him/her. Requests to the General Manager will be for a period of time deemed necessary by the employee for the purpose of the leave, but will not exceed ninety (90) days for each such period of leave. Each such request will be reviewed individually and will be granted only when the Director, the Director of Finance and Administration and the General Manager, in their sole discretion, determine that such leave would not adversely affect ecomaine. All leaves granted under this section will be for urgent personal or family matters: not for purposes of vacation or other such time off.

## 17. Holidays

The following Holidays shall be paid Holidays for all employees of ecomaine: New Year's Day, Martin Luther King Day, Presidents' Day, Patriot's Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, Thanksgiving Day, the day after Thanksgiving and Christmas Day.

If a Holiday falls on a Saturday, the preceding Friday shall be the observed Holiday; if the Holiday falls on a Sunday, the following Monday shall be the observed Holiday. Any non-salaried employee who is required to work on holidays falling in their regular work week will be paid time and one-half for hours so worked, in addition to their regular Holiday pay.

## 18. Discipline

ecomaine may take appropriate disciplinary action for just cause including, but not limited to, written warning, suspension or dismissal.

A copy or notification of any disciplinary action taken shall be delivered to the employee and shall be placed in the employee's personnel file.

## 19. Employee Grievance

Any dispute between ecomaine and any employee concerning the interpretation or application of any specific provision of this policy shall be a grievance. Two or more employees may file a single grievance if their claims involve a common set of circumstances other than discipline or discharge.

### Informal Procedure:

The grievance shall be discussed by the affected employee with the supervisor.

### Formal Procedure:

Level One: If a satisfactory settlement is not reached under the Informal Procedure, the grievance shall be reduced to writing, signed by the aggrieved employee with a statement of the section or sections of the Policy allegedly violated and delivered to the Director of Finance and Administration, or his/her designee, within thirty (30) days after the event giving rise to the grievance becomes known to the aggrieved employee. Within twenty-five (25) working days after receipt of the written grievance, the Director of Finance and Administration, or his/her designee, shall meet with the grievant. Within ten (10) working days after this meeting, a written decision shall be delivered to the grievant.

Level Two: If the grievance is not resolved under Level One, the grievance shall be presented by the grievant to the General Manager within ten (10) working days following receipt of the decision of the Director of Finance and Administration or his/her designee. Within twenty-five (25) working days after receipt of the grievance the General Manager shall meet with the grievant. Within ten (10) working days following this meeting, a written decision shall be delivered to the grievant. The decision of the General Manager shall be final.

## 20. Retirement

ecomaine shall provide a retirement plan for all regular employees, after their probationary period is completed, and contribute 8% of gross pay to such plan on behalf of each employee.

## 21. Group Life Insurance

ecomaine shall provide basic group life insurance for all regular employees, at no cost to the employee. Employees may purchase, at their cost, dependent coverage if available from the same source.

## **22. Group Hospital, Surgical and Major Medical Insurance**

ecomaine will provide a group insurance plan which provides high-level medical and surgical coverage and, in addition, major medical coverage. The specific provider and plan will be determined by ecomaine.

Regular Employees, and their families, are eligible to participate. The premium for both the employee and the employee's dependents shall be paid by ecomaine, except that employees will share in the costs of this benefit by payroll deduction for each weekly pay period as follows:

Employees will pay ten percent (10%) of total premiums.

## **23. Long Term Disability Insurance**

ecomaine will provide long term disability insurance to all employees, the specific provider and plan to be determined by ecomaine and the costs to be paid by ecomaine.

## **24. Workers Compensation**

All ecomaine employees shall be provided with Workers Compensation insurance benefits in accordance with the laws of the State of Maine.

## **25. Clothing and Safety Shoes**

ecomaine shall reimburse employees required to wear them, the cost of safety shoes that are approved by ecomaine, with a maximum reimbursement of one hundred dollars (\$150.00) per year.

ecomaine shall supply coveralls for all employees that are required to wear them. ecomaine will launder coveralls as necessary.

ecomaine shall replace or repair damaged prescription safety glasses for those employees required to wear them. Replacement will be limited to one pair per year.

## **26. Use of Personal Automobiles**

Employees may be required by ecomaine to use their personal automobiles for ecomaine business and, if so, will be reimbursed at the ecomaine mileage reimbursement rate in effect at the time.

## **27. Work Rules**

ecomaine will, from time to time, promulgate and post reasonable work rules and regulations governing the conduct of its non-union employees. Employees will comply with all such existing rules.

## 28. Safety

Each employee shall use good safety practices while employed at ecomaine. All employees are required to comply with the procedures and directives contained in the ecomaine safety programs, copies of which will be provided to each employee and all employees are required to comply with the procedures and directives promulgated jointly by the Safety Committee and management.

Employees shall report any accident to their immediate supervisor within twenty-four (24) hours and shall fill out an accident form.

ecomaine will make reasonable provisions for the safety and health of its employees during their hours of employment as required by State and Federal regulations.



Employee Acknowledgment  
(To be retained by the Company)

This certifies that I have received the ecomaine Statement of Non-union Personnel Policy (dated July 01, 2008) outlining ecomaine's policies, rules and general information. I understand that this policy is not an express or implied contract for employment, but rather an overview of working rules and benefits, which can change at ecomaine's discretion.

Furthermore, I acknowledge that my employment is not guaranteed for any particular length of time, and that either party remains free to terminate the employment relationship at any time.

---

Employee's signature

---

Date

ecomaine  
ATTACHMENT A  
July 1, 2008

COVERED POSITIONS

Shift Supervisor  
Superintendent of Maintenance  
Maintenance Supervisor  
Operations Supervisor  
Recycling Facilities Manager  
Landfill Manager  
Superintendent of Capital Projects  
Office Manager  
Environmental Manager  
Recycling Supervisor  
Landfill Supervisor  
Business Development Manager  
Communications Specialist  
Bookkeeper  
Environmental Specialist  
Recycling Coordinator  
Secretary/receptionist

Runyon  
Kersteen  
Ouellette

Certified Public Accountants and Business Consultants

February 26, 2009

Kevin Roche  
General Manager  
ecomaine  
64 Blueberry Road  
Portland, Maine 04102-1945

We are pleased to confirm our understanding of the nature and limitations of the services we are to provide for ecomaine.

We will apply the agreed-upon procedures listed in the *attached schedule* to ecomaine's records for the period from July 1, 2008 through the latter of: the date of retirement of the previous Director of Finance and Administration; the date of implementation of the new General Ledger package. This engagement is solely to assist you in evaluating the propriety of the recordkeeping and handling of ecomaine funds, as well as the propriety of the implementation of the new accounting software. Our engagement to apply agreed-upon procedures will be performed in accordance with standards established by the American Institute of Certified Public Accountants. The sufficiency of the procedures is solely the responsibility of the specified users of the report. Consequently, we make no representation regarding the sufficiency of the procedures described in the attached schedule either for the purpose for which this report has been requested or for any other purpose. If, for any reason, we are unable to complete the procedures, we will not issue a report as a result of this engagement.

Because the agreed-upon procedures listed in the attached schedule do not constitute an audit, we will not express such an opinion on the matters discussed above. In addition, we have no obligation to perform any procedures beyond those listed in the attached schedule. If, however, as a result of the procedures or through other means, any material matters come to our attention, we will disclose those matters in our report.

We will submit a report listing the procedures performed and the results of those procedures. This report is solely for the use of ecomaine, and should not be used by those who did not agree to the procedures. Our report will contain a paragraph indicating that had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

Our fees will be based on the actual time spent at our standard hourly rates plus out-of-pocket expenses. Based on our preliminary estimates, the fee for the engagement should approximate \$3,750. If unexpected circumstances require significant additional time, we will discuss it with you before we incur the additional cost.

Our invoices for these fees will be rendered each month as work progresses and are payable on presentation. In accordance with our firm policies, work may be suspended if your account becomes ninety days or more overdue and will not be resumed until your account is paid in full.

ecomaine  
February 26, 2009  
Page 2

We appreciate the opportunity to assist you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the enclosed copy and return it to us. If the need for additional services arises, our agreement with your will be revised. It is customary for us to enumerate these revisions in an addendum to this letter.

Sincerely,



Kathy B. Tyson  
Runyon Kersteen Ouellette

This letter correctly sets forth the understanding of ecomaine.

Officer signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## PROCEDURES

Our inspection will include the procedures listed below.

1. Examination of bank statements and bank reconciliations -- to determine that book balances and reconciling items appear to be properly stated.
2. Scan transactions/activity on bank statements-- to determine that activity appears reasonable and appropriate.
3. Examination of underlying documentation for general ledger expenditures and manual journal entries that appear to be unusual in nature or dollar amount.
4. Examination of custodian statements and general ledger entries for investment accounts – for any indication of impropriety.
5. Roll forward of July 1, 2008 account balances, plus/minus activity prior to transition to new accounting software, to opening balances as stated in the new General Ledger system – for indication of inaccuracies or impropriety.
6. Examination of payments to Rocco Marzilli, recently retired Director of Finance and Administration, representing amounts owed for accrued benefits – to determine propriety of such disbursements.