

**ADDENDUM I
WAGES, FRINGE CONTRIBUTIONS AND DEDUCTIONS
EFFECTIVE: MAY 1, 2021**

The wages, fringe contributions and deductions for Heavy, Highway & Utility Construction shall be as described below:

LOCAL UNION:	751 Kankakee
LABORER RATE	\$ 39.44
PENSION FUND	14.24
ANNUITY PLAN	7.50
N. CENTRAL IL WELFARE FUND	8.50
RETIREE VEBA	1.40
TRAINING FUND	.80
L.E.C.E.T. ¹	.20
MRFFC	.12
IAF	.20
UNION TOTAL PACKAGE	\$72.20
EMPLOYER TOTAL PACKAGE	\$72.40
DEDUCTIONS:	
MARKET PRESERVATION	0.66
VACATION FUND	3.00
WORKING DUES CHECK-OFF	5%

- 1) All payments (except otherwise noted below) to be sent to North Central Illinois Laborers' Health & Welfare Fund, 4208 W. Partridge Way Unit 3, Peoria, Illinois 61615-5650.
- 2) Overtime hours worked to be paid at the applicable overtime rate.
- 3) Pension and Annuity payments sent to Central Laborers' Fringe Benefit Funds, P.O. Box 1267, Jacksonville, Illinois 62651. Overtime hours for Annuity will be paid at the applicable overtime rate.
- 4) Employers that perform work in the Hazardous Waste, Asbestos and Lead Base Paint Industries shall pay a training program contribution of \$1.30 per hour.
- 5) Dues Check-Off and Market Preservation Fund to be deducted from the Basic Labor Rate for Local 751 sent to Local 751, 1390 Stanford Dr., Kankakee, IL 60901-9412.
- 6) Dues Check-Off calculated as a percentage of gross pay.
- 7) Vacation Fund Contributions: Overtime hours to be paid at the applicable overtime rate.
- 8) Welfare Fund Contributions: Welfare contributions for overtime hours worked to be paid at the straight time rate.
- 9) Union Total Package excludes AGCI IAF. Employer Total Package includes AGCI IAF.
- 10) Employers that perform work on Windfarms and Pipelines shall pay a L.E.C.E.T. contribution of \$0.28 per hour.

AGC OF ILLINOIS:

By: Frank Kazenske 4/9/2021
Frank Kazenske, Director of Labor Relations Date

GREAT PLAINS LABORERS' DISTRICT COUNCIL:

By: [Signature] 4/8/2021
Anthony Penn, Business Manager Date

By: Troy Part 4/9/2021
Troy Part, Laborers' Local 751 Date

Contractor's Signature

Contractor's Name

Contractor's Address

City State Zip

Telephone Number Date

Facsimile Number

Federal Employer Identification Number