

# Washington Handbook Addendum

## **ABOUT THIS HANDBOOK**

This Washington Handbook Addendum applies to Stiles Machinery employees who work in the State of Washington and supplements our Employee Handbook. The policies noted in this Addendum are in addition to those that make up the Employee Handbook, and the policies that reside within that Handbook still apply to all employees of Stiles Machinery. In the event of any inconsistency between the Handbook and this Addendum, this Addendum will control for our employees working in Washington.

# Washington-Specific Policies

## 1-1 Meal and Rest Periods

Employees who work more than five (5) hours will be provided a thirty (30) minute meal period no less than two (2) hours and no more than five (5) hours after the start of their normal workday. An additional thirty (30) minute meal period will be given five (5) hours from the end of the first meal period (and for each five (5) additional hours thereafter) as applicable. Employees who are required to remain on-call on the premises during a meal period will be paid.

Employees will be provided with a paid rest period of at least ten (10) minutes for each four (4) hours of working time unless the nature of their work allows them to take intermittent rest periods equivalent to ten (10) minutes for each four (4) hours worked. Rest periods shall be scheduled as near as possible to the midpoint of the work period; no employee shall be required to work more than three (3) hours without a rest period.

## 1-2 Paid Family and Medical Leave

Eligible employees are entitled to apply for Paid Family and Medical Leave (PFML) benefits through the PFML program administered by the Washington Employment Security Department (ESD).

### Eligibility and Benefits

To be eligible for PFML benefits, an employee must have worked for an employer in Washington for at least 820 hours in either the first four of the last five completed calendar quarters or the last four completed calendar quarters immediately preceding the application for leave. An eligible employee may receive PFML benefits for the following amounts of time within a one-year period:

- Family Leave. Up to 12 weeks of leave to:
  - bond with the employee's newborn child, newly adopted child, or newly placed foster child within the 12 months following the birth, adoption, or placement of the child;
  - care for a family member with a serious health condition; or
  - prepare for a family member's pre- and post-deployment activities, as well as time for childcare issues related to a family member's military deployment.
- Medical Leave. Up to 12 weeks for the employee's own serious health condition.
- Combined Family and Medical Leave. Up to 16 weeks of leave for a combination of Medical Leave and Family Leave (with up to an additional two weeks of leave if the employee experiences a pregnancy-related disability).

Leave during the six-week postnatal period must be allowed as medical leave unless the employee chooses to use family leave.

An employee may use paid family leave as bereavement leave during the seven calendar days following the death of a family member for whom the employee would have qualified for medical or family leave.

For purposes of PFML benefits, a family member is defined as the employee's child (including step-child, adopted child, foster child, child's spouse, or child to whom the employee stands in loco parentis, is a legal guardian, or is a de facto guardian), grandchild, grandparent, parent (including parent-in-law, adoptive, de facto, or foster parent, step-parent, or legal guardian), sibling, spouse, or registered domestic partner.

While on PFML leave, employees will be entitled to partial wage replacement, receiving a portion of their average weekly pay, up to a maximum established by law. An employee desiring to take PFML leave must apply to the ESD, which pays the benefits. Please visit [www.paidleave.wa.gov](http://www.paidleave.wa.gov) for more information on applying for PFML benefits.

Employees have the option to use accrued paid leave to supplement their PFML benefits during PFML leave, but are not required to do so.

### **Payment of Premiums**

The PFML program is funded by premiums paid by both employees and employers and is administered by the ESD. A small percentage of wages is withheld from each employee's paycheck and submitted quarterly to the ESD to cover the employee's portion of the premiums.

### **Employee Protections**

Employees who return from PFML leave will be restored to the same or an equivalent job if they have worked for the Company for at least 12 months and worked at least 1,250 hours in the 12 months before taking leave. Employees should consult with Human Resources regarding whether their health insurance will continue during leave.

The Company will not discriminate or retaliate against employees for requesting or taking PFML.

### **Concurrent Leaves and Pregnancy Disability Leave**

Medical leave, state family and medical leave, disability, or other leave taken for a condition that also qualifies as a serious health condition under the federal Family and Medical Leave Act (FMLA) will be designated as FMLA leave, except where state law requires otherwise. Specifically, a female employee who is unable to work due to childbirth or pregnancy may take pregnancy disability leave in addition to any FMLA leave or PFML benefits for which she is eligible.

If you exhaust your FMLA leave after taking military caregiver leave, you are still entitled to family and medical leave under Washington's PFML program.

Certain employees who are ineligible for FMLA leave nevertheless may be eligible for PFML benefits paid by the Washington ESD. However, employees who are ineligible for FMLA generally will not be entitled to reinstatement of employment after their PFML leave. Contact Human Resources for additional information.

## **1-3 Domestic Violence Leave**

Employees who are victims of domestic violence, sexual assault, or stalking may take reasonable unpaid leave from work to take care of legal or law enforcement needs or to get medical treatment, social services assistance, or mental health counseling. Employees who are qualifying family members of a domestic violence victim are also eligible for leave under this policy.

Although leave is unpaid, employees may substitute their accrued paid leave for unpaid leave under this section.

You must give as much advance notice of the need for leave under this policy as is possible. Leave requests must be supported by one or more of the following:

- A police report indicating you are, or your qualifying family member is, a victim of domestic violence, sexual assault, or stalking.
- A court order providing protection to the victim.
- Documentation from a health care provider, advocate, clergy-member, or attorney.
- A written statement that you are, or your qualifying family member is, a victim and needs assistance.

For purposes of this policy, family member means child, spouse, parent, parent-in-law, grandparent, or person you are dating. The Company may request verification of your family relationship.

## **1-4 Military Family Leave**

Employees who work an average of 20 hours or more per week and have a spouse or state registered domestic partner in military service may take up to 15 days of unpaid leave while the military service member is on leave from deployment, or before and up to deployment, during a period of military conflict. You must provide the Company with notice of your intent to take leave within five business days of receiving official notice that your spouse or state registered domestic partner will be on a leave or will be called or ordered to duty.

Please contact Human Resources for further details on this benefit.

## **1-5 Parental Leave**

The Company will provide parental leave to step-parents, in addition to other employees identified in the Employee Handbook's Parental Leave Policy.

## **1-6 Military Leave**

Stiles Machinery will grant a military duty leave of absence for all employees who volunteer for or are called to military service as defined by state and federal law.

You will not be paid while on military leave. However, you may use accrued, unused paid time off hours for any approved military leave. You must give Stiles Machinery notice of your service obligations as far in advance as is reasonable under the circumstances. Exempt employees will not have their pay reduced in any partial week of military service.

If you are on military leave for fewer than 31 days, you must pay your share of the cost of benefits under Stiles Machinery's benefit plan. If you do not pay your share of the cost of benefits, you will be dropped from Stiles Machinery's benefit plan and will not be eligible to re-enroll until the next annual open enrollment period. If you are on military leave for 31 days or more, you will be notified of your rights for continued coverage under federal law.

Reinstatement on return from military service will be determined in accordance with applicable federal and state law. Please contact Human Resources for more information on Stiles Machinery's reinstatement policy and guidelines.

## **1-7 Lactation Breaks**

Nursing mothers will be provided such lactation breaks outlined in the Company's Employee Handbook, except such breaks shall be provided for up to two years after the birth of the mother's child.

## **1-8 Volunteer Emergency Services Personnel Leave**

Employees are permitted an unpaid leave of absence to serve as a volunteer firefighter, reserve officer, or civil air patrol member in connection with an emergency operation.

## Washington Handbook Addendum Acknowledgment

This Washington specific Handbook Addendum is an important document intended to help our employees become acquainted with policies specific to the State of Washington. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the Company's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of leadership.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this Washington Handbook Addendum.

**I have received and read a copy of Stiles Machinery's Washington Handbook Addendum. I understand that the policies, rules, and benefits described in it are subject to change at the sole discretion of the Company at any time.**

**I further understand that my employment is terminable at will, either by myself or the Company, with or without cause or notice, regardless of the length of my employment or the granting of benefits of any kind.**

**I understand that no representative of Stiles Machinery other than the Head of Human Resources and/or the President may alter "at will" status, and any such modification must be in a signed writing.**

**I understand that my signature below indicates that I have read and understand the above statements and that I have received a copy of the Company's Washington Handbook Addendum.**

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

Employee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The signed original copy of this acknowledgment will be filed in your personnel file.