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CITY OF FORT LAUDERDALE					DATE ISSUED: 09-25-06	
POLICY and STANDARDS MANUAL			CHAPTER: EMPLOYEE RELATIONS AND WELFARE			6
			SECTION: REPORTING OF OVERTIME WORKED			32
SUBJECT: GENERAL POLICY AND PROCEDURES					1	
PURPOSE	<p>To explain the procedures that employees must follow when overtime hours are worked, and to ensure that all overtime is promptly reported so that employees are paid timely for all overtime worked or credited with the proper amount of compensatory ("comp") time. The prompt recording of overtime worked is required so that departments can adequately monitor overtime expenditures on an on-going basis. Procedures for earning overtime are contained in the individual bargaining agreements. This policy is not meant to change those requirements.</p>					
COVERAGE	<p>This policy applies to all "nonexempt" employees of the City of Fort Lauderdale per the provisions of the Fair Labor Standards Act (FLSA). These employees are commonly referred to as hourly-paid employees - they receive either cash overtime or comp time for hours worked beyond their normal workweek (usually 40 hours).</p>					
POLICY	<p><u>Prior</u> to working any overtime, employees must receive approval from their immediate supervisor. Where practicable, employees must receive written approval prior to working overtime. It is each supervisor's responsibility to ensure that sufficient funds are available in their department budget to cover all overtime expenses, and that all overtime is justified and properly documented.</p> <p>Employees must submit the appropriate timekeeping documentation to their immediate supervisor at the end of the work day/shift during which the overtime was worked. Form J-224 (see attachment) will be used to document overtime worked unless the department uses an automated timekeeping system (Scantron, Kronos, etc.). It is each supervisor's responsibility to train their employees regarding the following: 1) the overtime pre-approval process; 2) the documentation required for overtime hours worked; and 3) the requirement that all overtime documentation must be submitted for supervisory approval in a timely manner.</p> <p>Supervisors (including acting supervisors) are required to review overtime documentation submitted by their employees and to timely approve/disapprove this documentation so that the payment of the cash overtime or crediting of comp time is included in the pay check issued for the bi-weekly pay period during which the overtime was worked. IAFF union personnel assigned to a 48-hour workweek schedule are on a 21-day work cycle (for overtime pay calculation purposes). Except in extraordinary circumstances, overtime pay for these IAFF employees should be included in the paycheck immediately following completion of the 21-day work cycle.</p>					

In the event there are any contradictions between these procedures and any provision(s) of a labor agreement, the labor agreement will control.

Please contact your department's timekeeper with any questions. For questions that cannot be resolved at the department level, contact either the Classification and Compensation Manager or Personnel Records Specialist in the Human Resources Department.

CITY OF FORT LAUDERDALE, FLORIDA OVERTIME AUTHORIZATION FORM

CASH

"COMP" TIME

EMPLOYEE NAME: _____

EMPLOYEE #: _____

DATE OVERTIME WAS WORKED: _____

REGULAR WORK SHIFT HOURS: _____ A.M./P.M. - _____ A.M./P.M.
(from) (circle) (to) (circle)

LUNCH PERIOD: _____ A.M./P.M. - _____ A.M./P.M.
(from) (circle) (to) (circle)

NUMBER OF OVERTIME HOURS WORKED: _____

OVERTIME WAS WORKED: _____ A.M./P.M. - _____ A.M./P.M.
(from) (circle) (to) (circle)

REASON OVERTIME WAS REQUIRED: _____

MY SIGNATURE BELOW CONFIRMS THAT THE ABOVE IS A COMPLETE AND ACCURATE RECORD OF THE HOURS I WORKED FOR THE LISTED TIME PERIOD. I UNDERSTAND THAT WILLFULLY PROVIDING FALSE PAYROLL INFORMATION MAY SUBJECT ME TO DISCIPLINARY ACTION UP TO AND INCLUDING DISMISSAL.

EMPLOYEE'S SIGNATURE: _____ **DATE:** _____

APPROVED BY: _____ **DATE:** _____
SUPERVISOR'S NAME/JOB TITLE