

RURAL CARRIER REQUEST FOR INTERIM ADJUSTMENT

Post Office & Zip Code _____

Route Number _____

Note: Extend all calculations three places after the decimal and round back to two.

1. Present Standard Hours from the latest Form 4241A: (Hours and Minutes) _____

2. A. Enter "official mileage" from the latest Form 4003: _____

B. Enter present Mileage _____

C. Difference (+ or -): _____ X 12 = _____

3. A. Number of regular boxes from latest Form 4241A: _____

B. Present number of regular boxes: _____

C. Difference (+ or -): _____ X 2.0 [or 1.82] = _____
(If "L" Route, use 1.82)

4. A. Number of central boxes from latest Form 4241A: _____

B. Present number of central boxes: _____

C. Difference (+ or -): _____ X 1 = _____

5. Total new boxes (regular & central): _____ X _____ = _____
(Volume Factor from Form 4241A)

6. Total of lines 2C., 3C., 4C., & 5 (+ or -): = _____

Note: When the number of minutes on this line is 60 or more, (+ or -), the route qualifies for an Interim Adjustment if the new standard hours place it in a higher (or lower) classification.

7. Convert to hours and minutes (line 6 divided by 60): = _____

Note: Remember to convert the number to the right of the decimal from hundredths to minutes, with a conversion chart.

8. New Standard Hours (Total of line 1 + line 7): = _____

***ENTER MOST CURRENT TOTALS FOR ALL OF THE FOLLOWING ITEMS:

1. Parcel Lockers _____ 2. Collection Compartments _____ 3. Stops _____

4. Weekly Dismounts _____ 5. Weekly Dismount Distance: _____

Under the provisions of Article 9.2.C.10., I qualify for an Interim Adjustment

Please process the necessary paperwork:

Signature of Carrier: _____ Date: _____

I agree to use sufficient annual leave during the guarantee period to assure that I will not exceed 2080 work-hours. I am requesting the High Option _____; Low Option _____.

Signature of Carrier: _____ Date: _____