

Pay Equity Commission

180 Dundas St W Suite 300 Toronto On M7A 2S6 416 314-1896 or 1 800 387-8813 TTY: 416 212-3991 or 1 855 253-8333 Fax: 416 314-8741

Request for Information Union/Employer Questionnaire

File No.

Note: Please answer all questions and submit by mail or in person.

Please type or print clearly in ink. You may add additional pages if space is insufficient.

Submit this Questionnaire:

Pay Equity Commission
Pay Equity Office
180 Dundas St W Suite 300
Toronto On M7A 2S6
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TTY: 416 212-3991 or 1 855 253-8333

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1. Applicant Name				
Last Name		First Name		
2. What is the nature of the employer's business?				
3. Indicate the number of employees in the bargaining unit with this employer				
4. Indicate the number of Female Job Classes in the bargaining unit				
5. If there is an existing pay equity plan and the Union believes that it is no longer appropriate please provide specific details as to why with reference to ss 14. 2 or 13.1 of the <i>Pay Equity Act</i> . For example, describe what are the changed circumstances in the establishment that render the pay equity plan inappropriate for the bargaining unit? e.g. restructuring of business.				
6. If there is no existing pay equity plan, was the Employer required to post a pay equity plan under Part II or Part III.1 of the <i>Pay Equity Act</i> ?				
Yes	□ No		☐ I do not know	
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7. If the applications relates to the certification or decertification of a Union, when did this occur and was there a pay equity plan prior to the certification or decertification of a Union?					
Certification	☐ Decertification	Date (yyyy/mm/dd)			
Yes, there was a pay equity plan prior to the certification or decertification of a Union.					
No, there was <u>not</u> a pay equity plan prior to the certification or decertification of a Union.					
8. If there was no pay equity plan prio to post a pay equity plan under Part II	r to the certification or decertification of or Part III.1 of the <i>Pay Equity Act</i> ?	a Union, was the Employer required			
☐ Yes	□ No	☐ I do not know			
9. If the application concerns a compl	aint that pay equity has not been mainta	nined or that there are changed			
	ich that the plan is no longer appropriat				
10. If the complaint is that there has be and why you believe that the wage gap	een a widening of the wage gap identify o has widened?	which female job classes are affected			
11. If the complaint concerns an allegation that male comparators have disappeared, identify the female job classes affected and which male comparators have disappeared?					
12. If the complaint concerns the creation of new job classes, identify the new job classes that you allege have not been evaluated or evaluated inappropriately and why?					
13. If the complaint concerns jobs that have significantly changed such that the pay equity plan is no longer appropriate for those female job classes, identify the female job classes which you believe have significantly changed and what the changes are? (see s 22 (2) of the <i>Pay Equity Act</i>).					

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14. If the complaint is that the negotiated pay equity plan contravenes the <i>Pay Equity Act</i> , provide details as to the alleged contravention of the <i>Act</i> , with specific reference to the provisions of the <i>Pay Equity Act</i> .				
15. If the complaint is that the Employer has contravened the <i>Pay I</i> details of the alleged contravention.	Equity Act in any other manner, please provide			
16. For example, if the complaint is that the Employer has refused comply with its obligations under s. 7 (2) of the <i>Pay Equity Act</i> , pro requested and the response received from the Employer. If this reletters and responses received.	ovide details as to the information that was			
17. Has the Union raised any of these issues with the Employer, are these issues raised in writing, provide copies of the letters sent and				
18. If the Union and Employer are currently discussing these issue any regarding the above issues?	es, what is the current status of the negotiations if			
19. Please include any further information or documents that may correspondence to and from the Employer, pay equity plan(s), Expinformation, salary grids, newsletters and memos to Employees.				
The information is collected under the authority of the Pay Equity	Act. 1987 for the purposes of this enforcement.			
For information concerning the collection and use of this informat Office, at the following address:				
Pay Equity Commission Pay Equity Office 180 Dundas St W Suite 300 Toronto On M7A 2S6 416 314-1896 or 1 800 387-8813 TTY: 416 212-3991 or 1 855 253-8333 Fax: 416 314-8741				
Last Name of person completing this form	First Name of person completing this form			
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