

Adjustment Consultation

Carriers will be provided the evaluated time for their routes as soon as practicable after the initial consultation and in advance of the adjustment consultation. Any changes made to the proposed adjustments after the adjustment consultation will be communicated with the carrier in advance of implementing route adjustments. The route evaluation and adjustment team will conduct the adjustment consultation either in person or telephonically.

A copy of the following statement will be provided to the carrier:

Once the route evaluation and adjustment team has agreed on their proposed adjustments, with or without the use of COR, they must make the completed PS Form 1840 Reverse available to the letter carrier at least 1 day prior to the adjustment consultation.

Along with all the information regarding the proposed adjustments, the 1840 Reverse must include the route evaluation and adjustment team's reasons for the selection of the evaluated office and street times.

Every proposed adjustment must be clearly identified, documented, and explained on the PS Form 1840 Reverse and attachments so that they can be easily discussed with the carrier.

The comments and recommendations of the carrier and whether there is agreement or disagreement with the proposed adjustments along with the reasons should be entered on the PS Form 1840 Reverse. The carrier is not required to sign the form or any statement. A completed copy of the PS Form 1840 Reverse and any attachments will be provided to the carrier.

After reviewing the comments from the carrier consultation, the route evaluation and adjustment team will make any jointly agreed to changes to the proposed adjustments, sign off on their final agreed to adjustments, and submit the package to the district office for implementation. Copies of any amended PS Form 1840 Reverse, will be sent to the appropriate carrier through the local office contacts.

Proposed Adjustment Consultation conducted by:

USPS (name) _____ NALC (name) _____

(Signature) _____ (Signature) _____

Date _____

NOTE: Under no circumstances will route adjustments be implemented unless both the union and management route evaluation and adjustment team members have signed off on the adjustments.