

Cell Phone Reimbursement Agreement

Employee Name: _____ Reimbursement Start Date*: _____
Job Title: _____ Monthly Reimbursement Amount (select one):
Dept Name: _____ **Voice** **Voice/Data**
Employee Number: _____ Cost **___\$35** **___\$65**
Mobile Device #: _____ Cellular Carrier: _____

Please indicate business usage on back page of this agreement.

**Reimbursement payment should begin with the start of the next month.*

Regulation Summary

Employees who hold positions that include the need for a cell phone may receive a cell phone reimbursement for business-related costs incurred when using their personally-owned cell phones. The reimbursement will be considered a non-taxable fringe benefit to the employee. The level of reimbursement will be determined by a person's job duties as it relates to cell phone use and access. The Data access rate will be considered for those employees required to access the internet outside of a WiFi enabled location. The department will review and set the service level reimbursement on an annual basis. For more information, refer to the *Cell Phone Reimbursement Policy*.

Employee Responsibilities

Recipients of a cell phone reimbursement have the following responsibilities:

- Purchase cellular phone service and equipment and assume responsibility for vendor terms and conditions. The employee is responsible for plan choices, service features, and calling areas that meet the requirements of the job and the area of service the reimbursement is intended to cover (at work, during travel or at home). This includes termination clauses, and paying all charges associated with the cellular service and device.
- Attest to related necessary business use (see page 2). Submit the latest monthly billing statement when the reimbursement begins and then each December to verify that the reimbursement is spent on this resource.
- Report any job function changes that eliminate or significantly reduce the business need for a cell phone to your supervisor within 5 business days of this change. Also, if the employee reduces service levels in the wireless contract below the reimbursed amount, the same communication expectations exist.
- Keep (or have access to) monthly invoices for a two-year period so they can be produced upon request by either a City of Boise representative or the Internal Revenue Service.
- Avoid using the cellular phone for work related purposes while operating a motor vehicle, machinery or in other dangerous situations.
- Comply with all City policies, including those pertaining to data security, acceptable computing use, and email.
- Delete all City data from the cell phone when employment with the city is severed, except when required to maintain the data in compliance with a litigation hold notice.

Employee Certification

By signing below, I certify that I have read, understand, and agree to the Cell Phone reimbursement Policy and my responsibilities under the policy.

Employee Signature

Date

Department Head Signature

Date

Necessary Business Usage Justification

Reason staff member requires mobile phone reimbursement :	
<p>Performs work which requires the employee to be out of the office on a regular basis where the availability of conventional telephones is limited. If yes, please explain:</p>	<i>Yes or No (circle one)</i>
<p>Performs work which requires the employee to regularly serve in an off-duty, on-call status with a significant degree of frequency. If yes please explain:</p>	<i>Yes or No (circle one)</i>
<p>Performs work which requires the employee to stand by for emergency call back where, once called, time is too critical to permit the employee to drive to a City facility and pick up a pool cell phone and then respond to the incident. If yes, please explain:</p>	<i>Yes or No (circle one)</i>
<p>Temporarily authorized to facilitate a night meeting or during a time the employee is away from the office, either locally or on overnight travel. If yes please explain:</p>	<i>Yes or No (circle one)</i>
<p>Life/health/safety requirements make having a cell phone an integral part of performing duties of job description, and for assured prompt response to emergency situations on a 24/7 basis. If yes, please explain:</p>	<i>Yes or No (circle one)</i>
<p>For justifiable, documented business need that will improve efficiency or work performance. If yes, please explain:</p>	<i>Yes or No (circle one)</i>
<p>The employee is required to be contacted on a regular basis and is field-based with no office or land line. If yes, please explain:</p>	<i>Yes or No (circle one)</i>