

Checklist of Labor Law Requirements

(CCR Title 8, Section 16421 J)

NAME (PRINT) _____ DATE _____

COMPANY _____ PHONE _____

ADDRESS _____ FAX _____

CITY _____ STATE _____ ZIP CODE _____

PROJECT MANAGER _____ SUPERINTENDENT/FOREMAN _____

CERTIFIED PAYROLL CONTACT NAME _____ PHONE/EXT. _____

CONTRACTOR LICENSE NO. _____ EXP. DATE _____

SPECIALTY LICENSE NO. _____ DIR NO. _____ OTHER NO. (DBE/MBE/VBE) _____

SELF-INSURED CERTIFICATE NO. _____ WORKERS COMP. POLICY NO. _____

PROJECT NAME _____ PROJECT #/BIDPACKAGE # _____

AWARDING BODY _____ ADVERTISEMENT DATE _____

IF SUB-CONTRACTING, LIST YOUR PRIME/GENERAL CONTRACTOR _____

TOTAL PROJECT AWARD AMOUNT _____ TOTAL PROJECT AWARD AMOUNT _____

THE FEDERAL AND STATE LABOR LAW REQUIREMENTS APPLICABLE TO THE CONTRACT ARE COMPOSED OF, BUT NOT LIMITED TO, THE FOLLOWING:

Payment of Prevailing Wage Rates

The contractor to whom the contract is awarded and its subcontractors hired for the public works project are required to pay not less than the specified general prevailing wage rates to all workers employed in the execution of the contract Labor Code Section 1770 et seq.

The contractor is responsible for ascertaining and complying with all current general prevailing wage rates for crafts and any rate changes that occur during the life of the contract Information on all prevailing wage rates and all rate changes are to be posted at the job site for all workers to view. Additionally, current wage rate information can be found at the DLSR web site, www.dir.ca.gov/dlsr/statistics_research.html.

Apprentices

It is the duty of the contractor and subcontractors to employ registered apprentices on the public works project and to comply with all aspects of Labor Code Section 1777.5, relating to Apprentices on Public Works. (1) Notify approved apprenticeship programs of contract award; (2) employ apprentices; (3) pay training fund contributions.

Penalties

There are penalties required for contractor's/subcontractor's failure to pay prevailing wages and for failure to employ apprentices. including forfeitures and debarment under Labor Code Sections 1775; 1776; 1777.1; 1777.7 and 1813.

Certified Payroll Reports

Under Labor Code Section 1776, contractors and subcontractors are required to keep accurate payroll records showing the name, address, social security number and work classification of each employee and owner performing work; also the straight time and overtime hours worked each day for each week, the fringe benefits, and, the actual per diem wage paid to each owner, Journey person, apprentice worker or other employee hired In connection with the public works project

This requirement includes and applies to all subcontractors performing work on Awarding Body projects even if their portion of the work is less than one half of one percent (0.05%) of the total amount of the contract.

The certified payroll records shall contain the same data fields listed on the Public Works Payroll Reporting Form (A-1-131) and contain or is accompanied by a declaration made under penalty of perjury. (California Code of Regulations, Section 16401).

Prime Contractors are responsible for submittal of their payrolls and those of their respective subcontractors as one package. Any payroll not submitted in the proper form will be rejected. In the event that there has been no work performed during a given week, the Certified Payroll Report shall be annotated: "No work" for that week or a Non-Performance Statement must be submitted.

Employee payroll records shall be certified and shall be made available for inspection at all reasonable hours at the principal office of the contractor/subcontractor, or shall be furnished to any employee, or his/her authorized representative on request, pursuant to Labor Code Section 1776.

Under Labor Code Section 1776(g) there are penalties required for contractor's/subcontractor's failure to maintain and submit copies of certified payroll records on request.

Nondiscrimination in Employment

There exist prohibitions against employment discrimination under Labor Code Sections 1735 and 1777.6, the Government Code, the Public Contracts Code, and Title VII of the Civil Rights Act of 1964.

Kickbacks Prohibited

Contractors and subcontractors are prohibited from recapturing wages illegally by accepting or extracting "kickbacks" from employee wages under Labor Code Section 1778.

Acceptance of Fees Prohibited

There exists a prohibition against contractor/subcontractor acceptance of fees for registering any person for public work under Labor Code Section 1779; or for filling work orders on public works contracts pursuant to Labor Code Section 1780.

Listing of Subcontractors

All prime contractors are required to list properly all subcontractors hired to perform work on the public works projects covering more than one-half of one percent, pursuant to Government Code Section 4104.

Proper Licensing

Contractors are required to be licensed properly and to require that all subcontractors be properly licensed. Penalties are required for employing workers while unlicensed under Labor Code Section 1021 and under the California Contractor License Law found at Business and Professions Code Section 7000 et seq.

Unfair Competition Prohibited

Contractors and sub-contractors are prohibited from engaging in unfair competition as specified under Business and Professions Code Sections 17200 to 17208.

Workers Compensation Insurance

Labor Code Section 1867 requires that contractors and subcontractors be insured properly for Workers Compensation.

OSHA

Contractors and subcontractors are required to abide by the Occupational, Safety and Health laws and regulations that apply to the particular construction project.

Proof of Eligibility/Citizenship

The federal prohibition against hiring undocumented workers, and the requirement to secure proof of eligibility/citizenship from all workers, is required.

Itemized Wage Statement

Labor Code Section 226 requires that employees be provided with itemized wage statements.

CERTIFICATION

I acknowledge that I have been informed and am aware of the foregoing requirements and that I am authorized to make this certification on behalf of _____ (Company Name)

I fully understand that failure to comply with any of the above requirements may subject me, or my company, to penalties as provided above.

Contractor (Signature): _____ Date: _____

Print Name: _____ Title: _____

AUTHORIZATION TO EXECUTE THE
"WEEKLY STATEMENT OF COMPLIANCE"

It is certified that _____ is completely familiar with the State's Labor Wage. Determinations which apply to _____ (project name), and thereby is charged with full authority and approval, on behalf of the undersigned, to compile the required weekly payroll documentation and to execute the "Weekly Statement of Compliance" for laborers and mechanics working on the site of this project.

Signature of Authorized Person

Name of Firm

Signature of Owner/Partner/Officer

Title

Date

This authorization must be executed by the owner, one of the partners, and/or an officer of the corporation.

Statement of Employer Payments



Date:		In Reply, Refer to Case No:	
Prime:			
Subcontractor:			
PROJECT NAME:			
PROJECT CONTRACT NO.:		County/location:	

HEALTH AND WELFARE

NAME OF PLAN _____	Address, City and Zip _____
ADMINISTRATOR _____	Address, City and Zip _____
CLASSIFICATION(S) USED _____	CONTRIBUTION PER CLASSIFICATION PER HOUR _____
CONTRIBUTIONS:	WEEKLY _____ MONTHLY _____ QUARTERLY _____ ANNUALLY _____

PENSION

NAME OF PLAN _____	Address, City and Zip _____
ADMINISTRATOR _____	Address, City and Zip _____
CLASSIFICATION(S) USED _____	CONTRIBUTION PER CLASSIFICATION PER HOUR _____
CONTRIBUTIONS:	WEEKLY _____ MONTHLY _____ QUARTERLY _____ ANNUALLY _____

VACATION/HOLIDAY

NAME OF PLAN _____	Address, City and Zip _____
ADMINISTRATOR _____	Address, City and Zip _____
CLASSIFICATION(S) USED _____	CONTRIBUTION PER CLASSIFICATION PER HOUR _____
CONTRIBUTIONS:	WEEKLY _____ MONTHLY _____ QUARTERLY _____ ANNUALLY _____

TRAINING

NAME OF PLAN _____	Address, City and Zip _____
ADMINISTRATOR _____	Address, City and Zip _____
CLASSIFICATION(S) USED _____	CONTRIBUTION PER CLASSIFICATION PER HOUR _____
CONTRIBUTIONS:	WEEKLY _____ MONTHLY _____ QUARTERLY _____ ANNUALLY _____

IF YOU USE OTHER PLANS NOT LISTED ABOVE, YOU MAY USE THE BACK OF THIS FORM TO PROVIDE THIS ADDITIONAL INFORMATION

AUTHORIZATION OF PAYROLL DEDUCTION

I, _____, hereby authorize _____ to deduct from each check for the purposes of:

Reason for Deduction	Amount of Deduction
•	\$
•	\$
•	\$
•	\$
•	\$
•	\$
•	\$

Please see the attached proof of payment for this contribution and all other supporting documents regarding this contribution/deduction.

Name of Employee

Name of Owner/Officer/Admin

Employee Signature

Owner/Officer/Admin Signature

Date

Date



PUBLIC WORKS PAYROLL REPORTING FORM

NAME OF CONTRACTOR: OR SUBCONTRACTOR:	CONTRACTOR'S LICENSE NO.:	ADDRESS:
	SPECIALITY LICENSE NO.:	

PAYROLL NO.:	FOR WEEK ENDING:	SELF-INSURED CERTIFICATE NO.:	PROJECT OR CONTRACT NO.:
		WORKERS' COMPENSATION POLICY NO.:	PROJECT AND LOCATION:

(1) NAME, ADDRESS AND SOCIAL SECURITY NUMBER OF EMPLOYEE	(2) NO. OF WITH- HOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY							(5) TOTAL HOURS	(6) HOURLY RATE OF PAY	(7) GROSS AMOUNT EARNED		(8) DEDUCTIONS, CONTRIBUTIONS AND PAYMENTS							(9) NET WGS PAID FOR WEEK		CHECK NO.
			M	T	W	TH	F	S	S														
			DATE									HOURS WORKED EACH DAY											
THIS PROJECT		ALL PROJECTS		FED. TAX	FICA (SOC. SEC.)	STATE TAX	SDI	VAC/HOLIDAY	HEALTH & WELF.	PENSION													
				TRAIING.	FUND ADMIN	DUES	TRAV/SUBS.	SAVINGS	OTHER*	TOTAL DEDUC-TIONS													
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NOTICE TO PUBLIC ENTITY

For Privacy Considerations

Fold back along dotted line prior to copying for release to general public (private persons).

(Paper Size then 8-1/2 x 11 inches)

I, _____, the undersigned, am the
(Name – print)

_____ with the authority to act for and on behalf of
(Position in business)

_____, certify under penalty of perjury
(Name of business and/or contractor)

that the records or copies thereof submitted and consisting of _____
(Description, number of pages)

are the originals or true, full, and correct copies of the originals which depict the payroll record(s)
of the actual disbursements by way of cash, check, or whatever form to the individual or
individuals named.

Date: _____

Signature: _____

A public entity may require a stricter and/or more extensive form of certification.

STATEMENT OF
NON-PERFORMANCE PAYROLL FORM

Payroll Report No. _____

I, _____, hereby certify under penalty of perjury no person(s) employed by _____ performed work on the construction project known as _____ for the payroll period commencing on the ____ day of _____, 20____ and ending on the ____ day of _____, 20____.

NAME OF AUTHORIZED PERSON

TITLE / POSITION

SIGNATURE OF AUTHORIZED PERSON

DATE

AFFIDAVIT UPON RECEIPT OF FINAL PAYMENT

Certification of Payment of Prevailing Wages

I, _____ as Controller of _____
(NAME) (COMPANY)

I hereby, certify under penalty of perjury:

- 1) That I am the Official Representative of the above named company and therefore responsible for compliance with the Public Works laws on this project.
- 2) That as Owner of this company, I was informed of the Federal Public Works laws and was given the information and forms to complete the project in compliance with these laws at the beginning of the project.
- 3) That all payrolls were true and complete, as submitted.
- 4) That the classifications listed for each worker on the payroll was applicable to the work performed by each mechanic, journeyman or laborer.
- 5) That all workers who performed labor on the project have been paid all prevailing wages as listed in the applicable determination due to them in the course of the work as listed on their timecards, including fringe benefits.
- 6) That all training fees, if applicable, to the trade in which they were employed have been paid to the appropriate, approved fund.
- 7) That all workers listed and paid as apprentices were registered, state apprentices.

Title: _____

Project: _____

Date: _____

Signature: _____

PUBLIC WORKS CONTRACT AWARD INFORMATION

Contract award information must be sent to your Apprenticeship Committee if you are approved to train. If you are not approved to train, you must send the information (which may be this form) to ALL applicable Apprenticeship Committees in your craft or trade in the area of the site of the public work. Go to: <http://www.dir.ca.gov/das/PublicWorksForms.htm> for information about programs in your area and trade. You may also consult your local Division of Apprenticeship Standards (DAS) office whose telephone number may be found in your local directory under California, State of, Industrial Relations, Division of Apprenticeship Standards.

Do not send this form to the Division of Apprenticeship Standards.

NAME OF YOUR COMPANY	CONTRACTOR'S STATE LICENSE NO
MAILING ADDRESS- NUMBER & STREET, CITY, ZIP CODE	AREA CODE & TELEPHONE NO.
NAME & ADDRESS OF PUBLIC WORKS PROJECT	DATE YOUR CONTRACT EXECUTED
	DATE OF EXPECTED OR ACTUAL START OF PROJECT
NAME & ADDRESS OF PUBLIC AGENCY AWARDED CONTRACT	ESTIMATED NUMBER OF JOURNEYMEN HOURS
	OCCUPATION OF APPRENTICE
THIS FORM IS BEING SENT TO: (NAME & ADDRESS OF APPRENTICESHIP PROGRAM(S))	ESTIMATED NUMBER OF APPRENTICE HOURS
	APPROXIMATE DATES TO BE EMPLOYED

This is not a request for dispatch of apprentices.

Contractors must make a separate request for actual dispatch, in accordance with Section 230.1(a) California Code of Regulations

Check One Of The Boxes Below

1. We are already approved to train apprentices by the _____
Apprenticeship Committee. We will employ and train under their Standards. Enter name of the Committee

2. We will comply with the standards of _____
Apprenticeship Committee for the duration of this job only. Enter name of the Committee

3. We will employ and train apprentices in accordance with the California Apprenticeship Council regulations, including § 230.1 (c) which requires that apprentices employed on public projects can only be assigned to perform work of the craft or trade to which the apprentice is registered and that the apprentices must at all times work with or under the direct supervision of journeyman/men.

Signature _____ Date _____

Typed Name _____

Title _____

**State of California - Department of Industrial Relations DIVISION
OF APPRENTICESHIP STANDARDS**



REQUEST FOR DISPATCH OF AN APPRENTICE – DAS 142 FORM

DO NOT SEND THIS FORM TO DAS

You may use this form to request dispatch of an apprentice from the Apprenticeship Committee in the craft or trade in the area of the public work. Go to: <http://www.dir.ca.gov/DAS/PublicWorksForms.htm> for information about programs in your area and trade. You may also consult your local Division Apprenticeship Standards (DAS) office whose telephone number may be found in your local directory under California, State of, Industrial Relations, Division of Apprenticeship Standards. **Except for projects with less than 40 hours of journeyman work, you must request and employ apprentices in no less than 8 hour increments.**

Date: _____	Contractor Requesting Dispatch:
To Applicable Apprenticeship Committee:	Name: _____
Name: _____	Address: _____
Address: _____	_____
_____	License No. _____
Tel. No. _____ Fax No. _____	Tel. No. _____ Fax No. _____

Project Information:

Contract No. _____

Name of the Project: _____

Address: _____

Dispatch Request Information:

Number of Apprentice(s) Needed: _____ **Craft or Trade:** _____

Date Apprentice(s) to Report: _____ (72 hrs. notice required) **Time to Report:** _____

Name of Person to Report to: _____

Address to Report to: _____

*You may use this form to make your written request for the dispatch of an apprentice. Requests for dispatch must be in writing and submitted at least 72 hours in advance (excluding weekends and holidays) via first class mail, fax or email. **Proof of submission may be required.** Please take note of California Code of Regulations, Title 8, § 230.1 (a) for all applicable requirements regarding apprenticeship requests and/or visit <http://www.dir.ca.gov/DAS/DASApprenticesOnPublicWorksSummaryOfRequirements.htm>*

DAS 142 (Revised 12/11)