

Federal Labor Standards

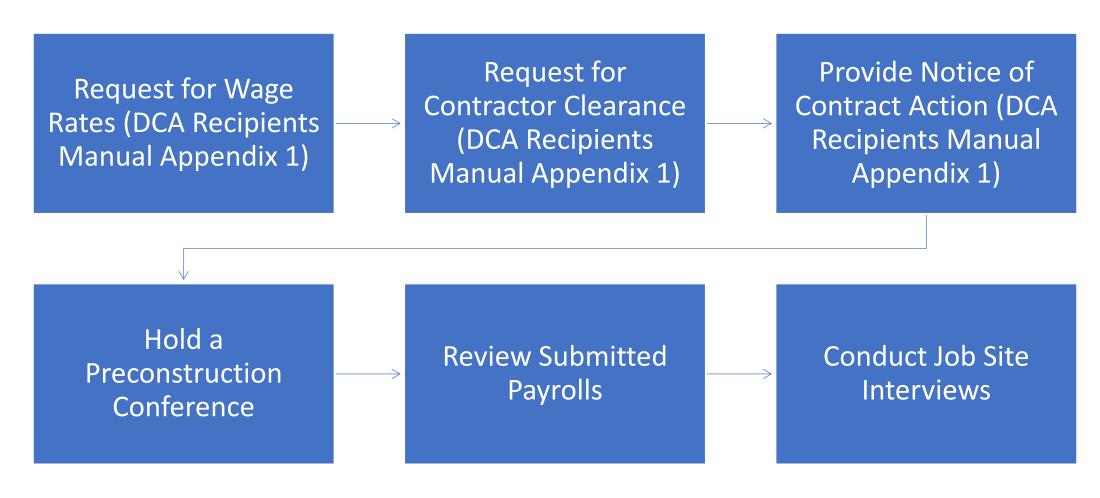
Key Regulations & Statues

- Copeland Act (Antikickback Act)
 - Prohibits kickback of pay
 - Requires certified weekly payrolls
 - Regulates payroll deductions

- Davis-Bacon Act
 - Outlines labor standards for federal projects
 - Applicable to all contracts over \$2,000 involving federal funds
 - Provides minimum wages by position
 - Applies to all laborers and mechanics
 - Applies to entire project, not just CDBG funded portion

- Contract Work Hours& Safety Act
 - Overtime pay for working over 40 hours (cannot get comp time in lieu of)
 - Applies to contracts over \$100,000
 - Requires liquidated damages of \$10 per day/per violation

Steps to Complying with Davis-Bacon & Related Acts



Georgia Department of Community Affairs

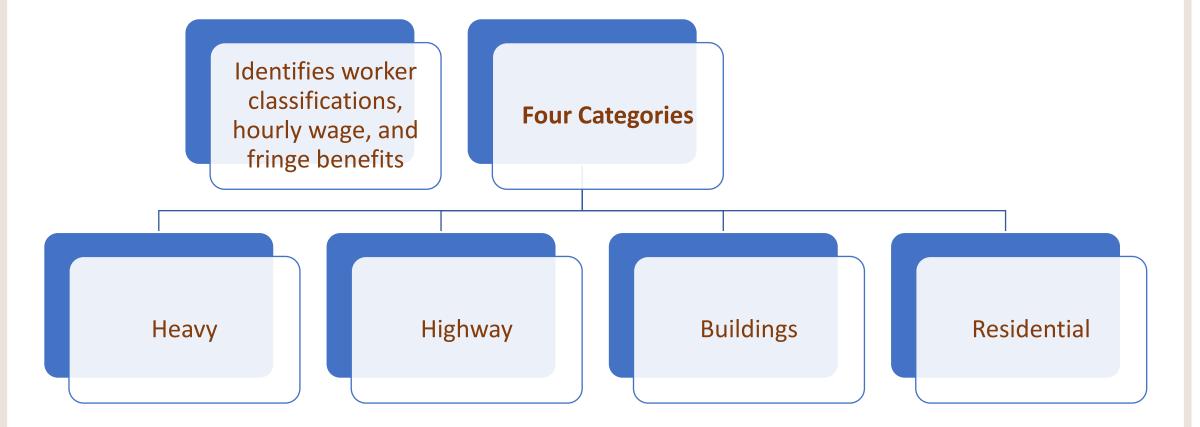
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Step 1: Request for Wage Determination

- Submit request to DCA (cdbg.biz@dca.ga.gov)
 - 30 days prior to advertising for contract bids
- Check 10 days before bid opening
 - 10-day wage check form
- Wage rates must be included in bid package and contracts.
- Include the estimated cost of each activity and the percentage of each activity on the form.

Georgia Department of Communi	v Affairs	Request for Determination and Response to Request				
Office of Community Develop		(Davis-Bacon Act as amended and Related Statutes)				
60 Executive Park South, N	ΙE					
Atlanta, Georgia 30329			the Davis-Bacon and related act. rom the date of publication in the			
		Federal Register without lin				
Name, Address and Phone Number		-				
o Which a Copy of This Determination						
s to be Mailed (Other than Grant Recipient)	CDBG Recipient	: (City/County)	Grant Number			
	Name					
Name			Project Name			
24	Title (Mayor/Cou	inty Commissioner)				
Street/Box	Street/Box		County			
City/State/Zip			Joanny			
<u> </u>	City/State/Zip		Date of this Request			
E-mail Address/Telephone Number	Area Code/Phon	- Ni walana				
Check Type of Work Estima	ted Cost	le Number				
Water/Sewer	100 0001					
Drainage	Estima	ated Advertising Date:	Estimated Date of Bid Opening:			
Street						
Buildings Estimated Total Cost	Estima	ated Date of Contract Award:	Estimated Construction Start Date:			
Estilliated Total Cost						
То Ве	Completed by Geor	gia Department of Community	Affairs			
Approving DCA Representative:						
Wage Decision Number (s):						

Wage Decision



Georgia Department of Community Affairs

5

Wage Decision

2/12/24, 9:04 AM

SAM.gov

"General Decision Number: GA20240063 01/05/2024

Superseded General Decision Number: GA20230063

State: Georgia

Construction Type: Heavy

Heavy Construction, Includes Water and Sewer Lines, and Heavy Construction on Treatment Plant Sites and Industrial Sites (Refineries, Power Plants, Chemical and Manufacturing Plants,

Paper Mills, Etc.)

Counties: Bulloch, Candler, Emanuel, Evans, Glascock, Hancock, Jefferson, Jenkins, Johnson, Montgomery, Screven, Taliaferro, Tattnall, Toombs, Treutlen, Warren, Washington, Wheeler and Wilkes Counties in Georgia.

Note: Contracts subject to the Davis-Bacon Act are generally required to pay at least the applicable minimum wage rate required under Executive Order 14026 or Executive Order 13658. Please note that these Executive Orders apply to covered contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but do not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(1).

If the contract is entered into on or after January 30, 2022, or the contract is renewed or extended (e.g., an option is exercised) on or after January 30, 2022:

Executive Order 14026 generally applies to the contract. The contractor must pay all covered workers at least \$17.20 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in 2024.

If the contract was awarded on . Executive Order 13658

https://sam.gov/wage-determination/GA20240063/0

...

2/12/24, 9:04 AM

|or between January 1, 2015 and | January 29, 2022, and the | contract is not renewed or | extended on or after January | 30, 2022:

SAM gay

generally applies to the contract. The contractor must pay all covered workers at least \$12.90 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on that contract in 2024.

The applicable Executive Order minimum wage rate will be adjusted annually. If this contract is covered by one of the Executive Orders and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must still submit a conformance request.

Additional information on contractor requirements and worker protections under the Executive Orders is available at http://www.dol.gov/whd/govcontracts.

Modification Number

Publication Date 01/05/2024

SUGA2012-093 08/11/2012

Rates	Fringes
CARPENTER (Form Work Only)\$ 15.00 **	0.01
CEMENT MASON/CONCRETE FINISHER\$ 14.11 **	1.78
ELECTRICIAN\$ 20.77	0.38
LABORER: Common or General\$ 11.00 **	0.00
LABORER: Pipelayer \$ 11.76 **	0.00
OPERATOR: Backhoe/Excavator/Trackhoe\$ 18.20	0.00
https://sam.org/wage-determination/QA20240063/0	

'

Posters

WORKER RIGHTS

UNDER THE DAVIS-BACON ACT

FOR LABORERS AND MECHANICS WORKING ON FEDERAL OR FEDERALLY ASSISTED CONSTRUCTION PROJECTS

The law requires employers to display this poster where workers can readily see it.

PREVAILING WAGES

You must be paid not less than the wage rate listed in the Davis-Bacon Wage Decision posted with this notice for the work you perforn

OVERTIME

You must be paid not less than one and one-half times your basic rate of pay for all hours

worked over 40 in a work week. There are few exceptions

ENFORCEMENT Contract payments can be withheld to ensure workers receive wages and overtime pay due, and liquidated damages may apply if overtime pay requirements are not met. Davis-Bacon contract clauses allow contract termination and debarment of contractors from future federal contracts for three years. A contractor who falsifies certified payroll records or induces wage kickbacks may be subject to civil or criminal prosecution, fines and/or imprisonment.

APPRENTICES

Apprentice rates apply only to apprentices properly registered under approved federal or state

RETALIATION

The law prohibits discharging or otherwise retaliating against workers for filing a complaint, cooperating in an investigation, or testifying in a proceeding under the Davis-Bacon and Related

PROPER PAY

If you do not receive proper pay, or require further information on the applicable wages, contact the Contracting Officer listed below

or contact the U.S. Department of Labor's Wage and Hour Division.









Job Safety and Health

All workers have the right to:

- A safe workplace.
- · Raise a safety or health concern with your employer or OSHA or report a workrelated injury or illness, without being retaliated against.
- · Receive information and training on iob hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- · Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- · File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your rights.
- See any OSHA citations issued to your employer.
- · Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

This poster is available free from OSHA.

Contact OSHA. We can help.

Employers must:

- Provide employees a workplace free from recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related iniury or illness.
- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization. amputation, or loss of an eye.
- Provide required training to all workers in a language and vocabulary they can understand.
- · Prominently display this poster in the workplace
- · Post OSHA citations at or near the place of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHA-supported consultation programs in every state.



1-800-321-OSHA (6742) • TTY 1-877-889-5627 • www.osha.gov

Wage Decision & Posters

Must be posted on the Job Site

Employees must be able to view

Protect from the weather

Wage Decision Lock-in

Competitively Bid

- At bid opening if contract is executed within 90 days of bid opening
- If contract is not executed within 90 days, resubmit 10-day wage check form 10 days prior to contract execution and wage decision will be locked in at contract execution

Negotiated Contracts

- >At contract execution
- If a contract is modified to add additional work not within the scope of work in the original contract, the most recent applicable wage determination modification must be incorporated into the contract.

Step 2: Request for Contractor Clearance

 Ensures contractor is not on Federal Debarred list

Must be cleared before entering into a contract

 Email form to DCA (cdbg.biz@dca.ga.gov)

Georgia Department of Community Office of Community Development 60 Executive Park South, NE Atlanta, Georgia 30329-2231	Affairs	
Reques	t for Clearance of Prime Contractor	
CDBG Recipient	Grant Number	
Name	Title (Mayor/Commissioner)
Address	City, State, Zip	
Type of Work	Contractor Name and Address	Start Date
Submitted by:	Cleared by DCA Staff:	
Signature and Date	Signature and Date	
Signature and Date CC Form To:	Signature and Date	
	Signature and Date	
CC Form To:	Signature and Date	
CC Form To:	Signature and Date	

Step 3: Notice of Contract Action

NOTICE OF CONTRACT ACTION, PRIME CONTRACTORS

Community Development Block Grant

ACTION THIS REPORT () Notice of Award () Start of Construction Please attach itemized bid tabulation Contract(s) No:	Grant Number: Submitted by: Phone No: Date Submitted:		RETURN TO: CDBG Administrative Secretary GA. Dept. of Community Affairs 60 Executive Park South, NE Atlanta, Georgia 30329-2231
	Contract 1	Contract 2	Contract 3
Activity Number			
2. Architect/Engineer Name			
Description of Work Wage Dec.# / Mod. #			+
5. Bid Date			
6. Date of Execution			
7. Contract Amount			İ
8. Contractor/Address			
Construction Start Date (n/a at time of award)			
10. Estimated Completion Date			1

INSTRUCTIONS:

- Complete this form each time an award and/or start of construction. If award and/or construction start date coincide, only one report activity should be submitted. This also applies to multiple contracts.
- 2. Include appropriate information for all contracts each time form is submitted.
- 3. Number reports beginning with #1. Mark last report "Final".
- 4. Submit "Request for Clearance of Prime Contractor" separately
- 5. Attach certified bid tabulation.

- Must be submitted to DCA
- Include certified and itemized bid tabulation with form
- Construction <u>drawdowns will be withheld</u> if not submitted

Step 4: Pre-construction Conference - Mandatory

- Attended by the architect/engineer, grant administrator, the contractor and representatives of the local government.
- Outlines contractor & subcontractor responsibilities, project timelines, logistics, etc.
- Explain Davis-Bacon, other applicable laws & contract provisions, and Section 3

Include CDBG Reps when planning of the conference

CDBG Rep Contact Information

- Cindy Alligood: (478) 290-1074, Cindy.Alligood@dca.ga.gov
- Crystal Gaillard: (470) 965-2364, <u>Crystal.Gaillard@dca.ga.gov</u>
- Roderick Gilbert: (470) 783-4729, Roderick.Gilbert@dca.ga.gov
- Malisa Thompson: (404) 326-1048, Malisa.Thompson@dca.ga.gov

Step 5: Review Payrolls



Review

Review for all trades



Compare payrolls to wage decisions and interviews



Follow up

Follow up on discrepancies

Payrolls

- Contractors must submit all payrolls to grant recipient
- Must include the name and identifying number of each worker the first time they appear
 - Contractor must provide address and social security number upon request
 - Contractor records must include each workers classification, last known telephone number, and email address.
- Every contractor on the project must maintain records for three years after completion of the project.
- The prime contractor must maintain a complete set of payrolls from every sub- contractor, subcontracts, and related documents on the project for three years after completion of the project.

Payrolls

- Every payroll must
 - list the worker's classification, which must match the Wage Decision document
 - include the hourly rate of pay and the number of hours worked
 - indicate permissible deductions (see 29 CFR Part 3.5)
 - be numbered, with the last payroll labeled "Final Payroll"
 - be certified by the owner, officer or designee of the construction company (digital signatures are acceptable)

Payrolls

Sole proprietors and self-employed mechanics

- Cannot self-certify to wages without a crew
- Must be reported on "responsible employer" payroll
- Can certify to hours when working with a crew
- Only report hours worked and list owner as classification

Conformance Request (Additional Classification)

- Required when wage determination does not contain a classification that is applicable to the project.
- The work that will be performed by the requested classification cannot be performed by another classification contained within the wage decision
- The classification cannot come from another wage decision when multiple wage decisions are used in the contract.
- The requested wage rate and fringe benefit, if any, must bear a "reasonable" relationship to the existing wage rates contained in the wage decision.

Submitting a Conformance Request

- Request is submitted to DCA through CDBG.biz@dca.ga.gov
- Signed letter from the grantee requesting the additional classification;
- Applicable wage decision;
- Prime contractor must complete the SF-1444 and submit a written letter with a description of the work to be performed by the requested classification;
- And any related documentation or recommendations

	FOR AUTHORIZATION (OF	CHECK APPROPRIATE		OMB C	ontro	Number: 9000-0066
ADDITIONAL	CLASSIFICATION AND		CONSTRUCTION				ate: 5/31/2025
Reduction Act of 1995. The OMB control numbe questions. Send only co information to: U.S. Ger	of Statement - This information colle You do not need to answer these q if for this collection is 9000-0066. If imments relating to our time estima neral Services Administration, Regu- CONTRACTOR SHALL COMPLETS	uestions unle We estimate t te, including datory Secret	the requirements of ess we display a valid that it will take .5 hou suggestions for redu tariat Division (M1V1	44 U.S.C. § 350 1 Office of Man: irs to read the li cing this burde CB), 1800 F St	agement a nstructions n, or any o reet, NW, 1	nd Budg i, gather ther asp Washing	get (OMB) control number. the facts, and answer the lects of this collection of gton, DC 20405.
	THE CONTRACTING OFFICER.	L II LMO O II	TINOUGIT IU, KEEP	A FERDING C	OF I, AME	JUDM	IT THE REGUEST, IN
I. TO: ADMINISTRATOR, WAGE AND HOUR U.S. DEPARTMENT WASHINGTON, DC	OF LABOR		2. FROM: (REPORT)	NG OFFICE)			
S. CONTRACTOR					4.	DATE O	FREQUEST
S. CONTRACT NUMBER	ONTRACT NUMBER 6. DATE BID OPENED (SEALED 7. DATE O			8. DATE CONT STARTED	RACT WOR	ex	9. DATE OPTION EXERCISED (F APPLICABLE) (SERVICE CONTRACT ONLY)
0. SUBCONTRACTOR (IF	ANY)						·
2. LOCATION (C/TY, COL	ETE THE WORK PROVIDED FOR UND	ER THE ABOV	VE CONTRACT, IT IS N	ECESSARY TO	ESTABLISH	THE FO	ULLOWING RATE(S) FOR THE
INDICATED CLASSIFIC	ATION(8) NOT INCLUDED IN THE DE	PARTMENT O	OF LABOR DETERMINA DATED:	TION			
LIST IN ORDER: PROP	DSED CLASSIFICATION TITLE(S); JOS	B DESCRIPTIO	ON(S); DUTIES;		F RATE(S)		c. FRINGE BENEFITS
AND RATIONALE FOR P	ROPOSED CLASSIFICATIONS (Service) (Use reverse or attach additional sheets, if no		197	2.1012	L 1011 L(0)		PAYMENTS .
	E OF SUBCONTRACTOR REPRESENT	TATIVE	15. SIGNATURE AND	TITLE OF PRIM	E CONTRA	CTOR R	EPRESENTATIVE
14. SIGNATURE AND TITL (IF ANY)	E OF SUBCONTRACTOR REPRESENT	TATIVE	15. SIGNATURE AND	TITLE OF PRIM	E CONTRA	CTOR RI	EPRESENTATIVE
(IF ANY)	E OF SUBCONTRACTOR REPRESENT DYEE OR REPRESENTATIVE	TATIVE	15. SIGNATURE AND	TITLE OF PRIM	СНЕСК		RIATE BOX-REFERENCING BLOCK 13.
(IF ANY) IS SIGNATURE OF EMPL TO BE COMPLETED STANDARDS) OR F, THE INTERESTED F INCOMPLATION AND THE INTERESTED F	DYEE OR REPRESENTATIVE BY CONTRACTING OFFICES RF 2.2 406-3 (CONSTRUCTION ARTES ARREE AND THE CONTRACT RECOMMENDATIONS ARE ATTACHE ARTES CANNOT AGREE ON THE	R (CHECK) WAGE R TING OFFICER ED.	TITLE AS APPROPRIAT ATE REQUIREME R RECOMMENDS APP	E - SEE FAR NTS)) ROVAL BY THE	22.1019 NAGE AND	APPROPRIATE (SERVE) HOUR CO.	RATE BOX-REFERENCING BLOCK 13. E DISAGREE ICE CONTRACT LABOR RIVISION. AVAILABLE
(IF ANY) 16. SIGNATURE OF EMPL TO BE COMPLETED STANDARDS) OR F/ THE INTERESTED F INFORMATION AND THE INTERESTED F AND HOUR DIVISION	DYEE OR REPRESENTATIVE BY CONTRACTING OFFICES RR 22 406-3 (CONSTRUCTION ARTERS AGREES AND THE CONTRACT RECOMMENDATIONS ARE ATTACHE ARTERS CANNOT AGREE ON THE PR IN ST HEREFORE REQUESTED. AVA-	R (CHECK) N WAGE R TING OFFICER D. OPOSED CLA ILABLE INFOR	AS APPROPRIAT ATE REQUIREME R RECOMMENDS APP ASSIFICATION AND W. RIACTION AND RECOM	E - SEE FAR NTS)) ROVAL BY THE I	22.1019 NAGE AND	APPROPRIATE AGREEMENT OF THE CONTROL OF T	RATE BOX-REFERENCING BLOCK 13. E DISAGREE ICE CONTRACT LABOR RIVISION. AVAILABLE
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2025.06.26 13:46 3592 - Pembroke CDBG

Certified Payroll Report Ending Jun 01/25 Location: GEORGIA McLendon Enterprises, Inc.

Page 1 Pay Period: 202522

S.S.N. Name & Address	S WH	Code Class	A W	Job R	MON 26		WEI 7	D TH 28	1U 29	FRI 30	SAT 31	SUN 01	Tot Hrs	Pay Rate	Cash Fringe	Gross Pay	Earnings & Deductions Employer Benefits (*)	 3
4078 HWY 1 SOUTH LYONS,GA 30436	S 00	2052 LABORER: COMMON L TRUCK DRIVER: LOW				4. 3.	50 50					2)	4.50 3.50	26.25 26.25	.00	118.13 91.88	Hourly Gross Federal Taxes Social Security	1640.72 278.19- 112.36-
NON - Non Male White Check #(s) D00670						Emp	oloyer	Benefi nge Ra)S			8.00 55.00			210.01 158.41 2.51 1210.23	126 DENTAL INSURANCE 131 HOLIDAY TIME OFF	85.24- 26.28- 100.00- 31.80- 6.62- 210.00
2481 BEAUTIFUL ZION CHURCH REPEMBROKE, GA 31321		3026 LABORER: COMMON L	L1A	3592 R T	2						2.00		.00 2.00	26.00 39.00	.00 .00	.00 78.00	* Employer Health Insu Hourly Gross Federal Taxes Social Security	158.41 1312.10 188.61- 91.83-
NON - Non Male White Check #(s) D00670						Emp Hou	oloyer	Benefi nge Ra	other job its ate	os			2.00 53.00			78.00 219.25 3.99 1039.90	State Tax Medicare Pension 122 MEDICAL INSURANCE 126 DENTAL INSURANCE 128 VISION INSURANCE 131 HOLIDAY TIME OFF * 401k Employer Match Employer Health Insu	63.30- 21.48- 76.05- 31.80- 6.62- 1.41- 208.00 60.84 158.41
******6716 347 JD EDENFIELD RD	M 00	3049 TRUCK DRIVER: DUM	P1	3592 R	2				4.50				4.50	21.00	.00	94.50	Hourly Gross Federal Taxes	777.00 62.08-
LYONS,GA 30436 NON - Non Male White Check #(s) D00670						Emp	oloyer	Benefi nge Ra		os			4.50 40.50			94.50 158.41 3.52 704.08	Social Security State Tax Medicare 121 LOAN	56.12- 19.77- 13.12- 50.00- 31.80- 6.62- 1.41- 168.00 158.41
******1021	M 00	4011 OPERATOR: EXCAVAT	T10	3592 R	2					10.00			10.00	22.00	.00	220.00	Hourly Gross	880.00

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

U.S. Wage and Hour Division

Rev. Dec. 2008 NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS OMB No.: 1235-0008 6690 TOT DRIVE / BLACKSHEAR, GA 31516 MEEKS QUALITY PAINTING & PRESSURE WASHING Expires: 02/28/2018 PAYROLL NO. PROJECT AND LOCATION New Health Department for Camden County 101 Winding Road Kingsland, Ga 31548 FOR WEEK ENDING PROJECT OR CONTRACT NO. 10/24/2024 FFY2021 CDBG- CV 21cv-y-020-1-6251 (1) (3)(4) DAY AND DATE (7) (9) (8) DEDUCTIONS DENTIFYING NUMBER NET GROSS M w " ALL THINNIPCIAL SECURITY S WITH-WAGES WORK TOTAL RATE AMOUNT HOLDING CLASSIFICATION TOTAL PAID HOURS WORKED EACH DAY HOURS OF PAY EARNED FICA TAX OTHER DEDUCTIONS FOR WEEK PAINTER 9.0 9.0 25.00 37 925.00 PAINTER 9.0 16.5 9.0 20.00 740.00

Step 6: Job Site Interviews

- Have to be conducted on representative # of workers in each classification
- Must observe workers working
- Interview responses should be checked against Wage Decision and payrolls
- Confidential should not be overheard by others

U.S. Department of Housing and Urban Development Office of Davis-Bacon and Labor Standards

OMB Approval No. 2501-0009

The public reporting burden estimate for this collection of information is 15 minutes per response on average. This includes reviewing instructions, searching existing data sources lays a currently valid OMB control number. The information collected ensures compliance with the Federal labor standards through recording interviews with construction workers. The and agencies collecting this information must maintain these records in a manner that protects the individuals on whom the information is maintained. The information collected herein is he information would have identified any. Comments concerning this burden statement, or this collection should be sent to: National Director, Office of Davis-Bacon and Labor Standards

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to Inform you of the following concerning the collection of the Information on this form.

A. AUTHORITY: Collection of the Information solicited on this form is authorized by the Davis-Bacon Act as promutgated through Department of Labor Regulations under 29 CFR Part 5

on the project. The information is reviewed by HUD authorized personnel to ensure compliance with Federal labor standards under the Dayls-Bacon Act on covered projects. If violations are D. CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION: The Information collection is voluntary. Refusing to give information will not impact your status with your employer or the

a. Project Name			2a. Employee Name								
o. Project Number			2b. Employee Phone Nur	mber (including area code)						
. Contractor or Subco	ontractor (Employer)		2c. Employee Home Add	ress & Zip Code							
			2d. Verification of identific	ation?							
			Yes No								
a. How long on this 3b. Last date on this 3c. No. of hours b? job before today? day on this job?			4a. Hourly rate of pay?	4b. Fringe Benefits?	4c.	4c. Pay stub?					
ob?	job before today?	day on this job?		Vacation Yes	No Yes	No					
				Medical Yes	No						
				Pension Yes	No						
Vousiah alassification	 n(s) (list all) continue in	block 10 if possessor									
i our jou orassilication	na) (nacan) continue ii	i block to it fledessary									
Your duties contin	ue in block 18 if necessa	ry .									
Tools or equipment u	sed continue in block	18 if necessary									
Are you an apprentice	e or trainee? Yes	No 10. Are you p	aid at least time and ½ for all	hours worked in excess	of 40 in a week? Ye	s No					
Are you paid for all ho	ours worked? Yes	No 11. Have you	ever been threatened or coe	rced into giving up any pa	art of your pay? Ye	s No					
		,		8 8 7 7							
a. Employee Signatu			12b. Date								
. Duties observed by	the Interviewer (Please b	e specific.)									
	e in block 18 if necessary	/									
. Remarks continu											
I. Remarks continu											
	Please Print)	15b. Signature of Inter	viewer		15c. Date of Intervi	ew					
	(Please Print)	15b. Signature of Inter	viewer		15c. Date of Intervi	ew					
	(Please Print)	15b. Signature of Inter	viewer		15c. Date of Intervi	ew					
a. Interviewer Name (15b. Signature of Inter	viewer		15c. Date of Intervi	ew					
ia. Interviewer Name (viewer		15c. Date of Intervi	ew					
ia. Interviewer Name (nation		viewer		15c. Date of Intervi	ew					
4. Remarks — continu 5a. Interviewer Name (Payroll Examin 8. Remarks — continu 7a. Signature of Payro	nation e in block 18 if necessary		viewer	177b. Date	15c. Date of Intervi	ew					

Previous aditions are obsolete Form HUD-11 (12/202

Exemptions

Volunteers

- Does not receive compensation for services performed
- Cannot be employed at any other time on the jobsite

Prison Labor

- Must have a letter from the Department of Corrections
- Must be utilized directly by the grantee

RECAP

- Request wage rates
- Request contractor clearance
- Ensure submission of weekly payrolls
- Conduct on-site interviews
- Review payrolls and compare to interviews
- Ensure correction of underpayments
- Maintain records



Prime Contractor Responsibilities

- Responsible for compliance of all contractors
- Include contract clauses and applicable wage rates in all sub-contracts
- Review wage rates for additional classifications
- Provide sub-contractors with guidance
- Prepare and submit certified payrolls for employees
- Maintain a complete set of payrolls from every sub- contractor, subcontracts, and related documents on the project for three years after completion of the project.

Sub-contractor Responsibilities

- Prepare and submit certified weekly payrolls
- •Review wage rates and request additional classifications, if necessary
- Ensure access to employees for on-site interviews
- •Maintain records for three years after completion of the project.

Final Wage Compliance Report

FINAL WAGE COMPLIANCE REPORT								
сомми	COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM							
CDBG Recipient:								
Grant Number:								
Project Name:		Project Completion Date	e:					
1. While you or your representative were reviewing the contractor's and subcontractor's weekly payroll submissions, were any laborers or mechanics paid less than the prevailing wage rate as specified in the Secretary of Labor's official Wage Rate Determination that applied to this project (Check one Answer)?								
	Y	es, or No.						
2. If yes, provide the fe	ollowing information	I.						
a) Total amount of wage restitution paid (difference between what was first paid and what was required to be paid by Wage Rate: \$ Method of restitution (check one): Paid by contractor, or Paid by CDBG Recipient government with funds withheld from payments to contractor.								
Name of Contractor or Subcontractor	Name of Affected Employee	Amount of Restitution Paid to Employee	Nature of the Violation Requiring Restitution					
Signed by:	т	itle:	Date:					

- Complete at end of project
- Captures restitution information

Required in closeout package

Resources

- Davis-Bacon and Labor Standards, Contractor Guide Addendum
 https://files.hudexchange.info/resources/documents/Davis-Bacon-and-Labor-Standards-Contractor-Guide-Addendum.pdf/
- Davis-Bacon and Labor Standards Agency/Contractor Guide
 https://files.hudexchange.info/resources/documents/Davis-Bacon-and-Labor-Standards-Agency-and-Contractor-Guide.pdf
- Department of Labor, Davis-Bacon & Related Acts <u>https://www.dol.gov/whd/govcontracts/dbra.htm</u>

Thanks!

Pam Truitt

Manager, CDBG Compliance & Field Services

Pam.Truitt@dca.ga.gov Direct: (404) 977-3326

dca.georgia.gov