STATE SERVICE CONTRACT

Contract #: | Date Advertised for Bids: | Date:
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Contract Bid Amount: | Contract Duration: | to

Description of Project: Project location, county, description

| Labor Compliance Contact Information: | Name
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ADDRESS
CITY, STATE ZIP
Phone Number:
Fax Number:

| Prime Contractor: | Name
---|---
ADDRESS
CITY, STATE ZIP

| Contract Manager: | Prejob performed by: LCO or CM Name
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POSTERS/NOTICES
Contractors are required to post all required state posters on the jobsite in an area accessible to all workers, including subcontractors. Posters must be readable and placed in visible areas allowing workers to access the posters before, during, and after work shifts. Jobsites with multiple locations must include a portable poster board to ensure continued access to the information. Posters placed in Foreman, Supervisor, or employee vehicles, in an offsite job trailer, or inside a temporary restroom do not meet the posting requirement. Resident Engineers, Contract Managers, and other delegated Caltrans staff will verify the prime contractor has posted the following:

☐ State General Prevailing Wage Determinations in effect on date advertised
   General prevailing wage determination
   Journeyman and Apprentice Prevailing Wage Rates can be accessed at the following website:
   [http://www.dir.ca.gov/dlsr/DPreWageDetermination.htm](http://www.dir.ca.gov/dlsr/DPreWageDetermination.htm) Reference: Labor Code 1773.2


☐ Department of Fair Employment and Housing (DFEH) Forms 162 (English) and 162(S) (Spanish), Discrimination and Harassment in Employment is Prohibited by Law

☐ Pay Day Notice

☐ Notice of Labor Compliance Program Approval (English and Spanish) Reference: CCR 16429
   Posters may be printed from the Labor Compliance page on the Caltrans website at:
   [http://www.dot.ca.gov/hq/construct/LaborCompliance/posters.htm](http://www.dot.ca.gov/hq/construct/LaborCompliance/posters.htm)

PREVAILING WAGE REQUIREMENTS

☐ All workers employed in the execution of a public works project, including sole proprietors, partners, and corporate officers, must be paid not less than the specified prevailing wage rates for the type of work performed. Reference: Labor Code 1774

☐ Overtime must be paid for all hours over 8 in a calendar day and 40 hours in a week. Violations may subject the contractor to a state penalty of $25 per day per worker. Reference: Labor Code 1810-1815

☐ Saturday/Sunday premium rates are applicable as indicated on prevailing wage determinations.

☐ When required, shift differential rates must be paid for classifications which include a shift determination.
For building contracts, state building wage rates are applicable.

**State Prevailing Wages**

* Single asterisk indicates that this wage determination can be used for the life of the contract.
** Double asterisk indicates that this wage determination includes predetermined increases.

Subsistence/Zone pay must be shown on the fringe benefit statement if not shown on certified payroll.

⇒ The contractor must make applicable travel and subsistence payments in accordance with information on file with the Department of Industrial Relations (DIR) for classifications utilized.

Contact the Prevailing Wage Unit at (415) 703-4774 or available at:

[http://www.dir.ca.gov/dlss/PWD/index.htm](http://www.dir.ca.gov/dlss/PWD/index.htm)

Reference: Labor Code 1773.1

Contractors violating prevailing wage requirements are subject to a penalty of up to $200 per day per worker, paid in addition to any wage underpayments. Liquidated damages in the amount of the wage underpayments may also apply.

References: Labor Code 1775 and 1742.1

### PAYROLL REQUIREMENTS

- All labor compliance documents submitted must be complete and accurate, and require the correct Caltrans contract number.
- Certified payrolls must be submitted weekly and documents (including electronic) not previously submitted are due with invoice. Reference: Labor Code 1771.5
- Certified payrolls must include ALL information as required by Labor Code 1776, and the information included on Caltrans form CEM-2502, Contractor/Subcontractor Payroll.
  Reference: CCR Section 16404; Labor Code 1776
- Classification and group numbers are required on all payrolls (i.e., Laborer-Group 1, Plumber-Pipefitter, etc.). When work classification is not shown, Caltrans will determine the wage rate based on duties performed. Reference: Labor Code 1776
- Payrolls must clearly show how gross and net wages are calculated, including fringe benefits.
- Caltrans form CEM-2503, Statement of Compliance, is due with each weekly payroll. Boxes must be marked indicating if benefits are paid to a fund and/or to the employee(s). All deductions marked “other” must be explained on the payroll or the Statement of Compliance (i.e. garnishments, tools, etc.).
  References: Labor Code 1776
- Caltrans form CEM-2501, Fringe Benefit Statement, must be completed and signed showing hourly rates and the name and address of the plan(s) whenever any portion of the fringe benefits are paid to a plan, fund, or program. The form must be submitted with the first payroll and when fringe benefits or subsistence amounts change. Fringe Benefit Statements must be specific to the contract. Reference: Labor Code 1773.1
- All contractors are required to provide itemized wage statements (check stubs) to employees.
- Failure by the prime to submit the required reports or documents will result in all payments due the contractor withheld until the next invoice after compliance.
  References: Labor Code 1771.5
- Caltrans form CEM-2505, Owner-Operator Listing, may be used when owner-operators are performing on the project. References: CCR Section 16404; Labor Code 1776
  ⇒ The contractor employing an equipment owner-operator must complete the owner-operator listing. Forms will not be accepted from the equipment owner-operator unless the hiring contractor signs the owner-operator Statement of Compliance.
- Caltrans form CEM-2510, Truck Owner-Operator Certification of Ownership, is required for bona fide truck owner-operators hauling to/from the jobsite and must be resubmitted when information changes.
- For truck owner-operators hauling onsite, either Caltrans form CEM-2502, Contractor/Subcontractor Payroll, or form CEM-2505, Owner-Operator Listing, must be submitted.
- Payroll records must be preserved for 3 years after completion of the project.

APPRENTICES
☐ All requirements of the State Labor Code, Section 1777.5 apply including the following:
   ⇒ Submit Division of Industrial Relations form DAS-140, Public Works Contract Award Information, to the applicable apprenticeship committee prior to start of work. Form may be downloaded at: http://www.dir.ca.gov/DAS/PublicWorksForms.htm
   ⇒ Training fees MUST be sent to a state-approved apprenticeship program or the California Apprenticeship Council.
   ⇒ Apprentices must be paid the prevailing wage rate applicable to the classification in which they are registered and employed.
☐ Complaints or violations regarding apprentice ratios will be referred to DAS. Reference: CCR 16434
☐ Proof of registration in a state-approved apprenticeship program will be required and must be submitted with the first payroll on which apprentices appear.
   References: Labor Code 1777.5; Contract Provision

DISABLED VETERAN BUSINESS ENTERPRISES (DVBE)
☐ There is no DVBE participation goal for this contract.
☐ There is a DVBE participation goal of ______ percent applicable to this project.
   ⇒ Ensure DVBE performs a commercially useful function as defined in the California Military Veterans Code Section 999.
   ⇒ If a substitution is needed, the DVBE must be replaced with another DVBE.
      Reference: MVC 999.5(e)
   ⇒ Submit a written request to the contract manager citing one of the allowable reasons for substitution.
   ⇒ Written approval from the contract manager and Department of General Services (DGS) is required prior to change of a DVBE. Do not substitute until final approval is received from Caltrans.
   ⇒ Caltrans will provide request to Department of General Services (DGS) for approval.
☐ Maintain records of subcontracts made with certified DVBEs.

EQUAL EMPLOYMENT OPPORTUNITY (EEO) REQUIREMENTS
☐ Contractor must comply with the nondiscrimination requirements provided in the contract.
☐ Contractor will permit interviews of employees and owner-operators on the project during working hours.
☐ Contractor’s EEO Officer must be listed in posted policy. Name: ____________________________
☐ Caltrans provides contractor employees a Discrimination Complaint Procedures brochure (DFEH-151) upon receipt of an EEO complaint.

TRUCKING
☐ Are the trucking items/materials coming from a commercial source? Yes ☐ No ☐
   ⇒ Was the commercial source established prior to bid opening? Yes ☐ No ☐
      Who will pick up or deliver items/material? __________________________________________
   ⇒ Will there be stockpile(s) for this project? Yes ☐ No ☐
      If so, location(s) ________________________________________________________________
⇒ Caltrans Form CEM-2510, *Truck Owner-Operator Certification of Ownership* is required for truck owner-operators hauling to/from the jobsite and must be resubmitted if there is a change in information. For truck owner-operators hauling onsite, CEM-2502, *Contractor/Subcontractor Payroll* or CEM-2505, *Owner-Operator Listing*, must be submitted.

### ADDITIONAL CONTRACT INFORMATION

- Are there any lane closure restrictions that prevent the prime contractor or any subcontractors from working a normal work week?
  - Yes ☐  No ☐

- Will any of the following work be performed on the project?
  - Special/Night shifts:  Yes ☐  No ☐
  - Multiple Shifts:  Yes ☐  No ☐
  - Weekends:  Yes ☐  No ☐

- Caltrans Labor Compliance routinely conducts audits of contractor and subcontractor payroll records as indicated in the contract specifications.

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**I acknowledge that I have been informed and am aware of the Caltrans Public Works requirements listed above and that I am authorized to make this certification.**

### PRIME CONTRACTOR'S SIGNATURE BELOW

[Signature]

Print Name & Title below                     Date

(If joint venture make sure both sign)

### PAYROLL CONTACT NAME, E-MAIL ADDRESS AND FAX NUMBER

(to receive Labor Compliance Letters/Notices)

- Print Name: _____________________________  Title: _____________________________
- E-mail Address: _________________________  Phone Number: ___________________
- Fax Number: _____________________________

### SUBSISTENCE INFORMATION

Please add additional details in box below.