

REQUEST FOR DETERMINATION AND RESPONSE TO REQUEST

*(Davis Bacon Act as Amended
and Related Statutes)*

| | | | |
|---|--|--|---|
| FOR DEPARTMENT OF LABOR USE | Requesting Officer (typed name and signature) | | CHECK OR LIST CRAFTS NEEDED (Attach continuation sheet if needed) |
| | Department, Agency, or Bureau | | Phone Number |
| | Date of Request | Est. Advertising Date | Est. Bid Opening Date |
| | Prior Decision Number (if any) | Est. \$ Value of Contract <input type="checkbox"/> Under ½ Mil. <input type="checkbox"/> 1 to 5 Mil. <input type="checkbox"/> ½ to 1 Mil. <input type="checkbox"/> Over 5 Mil. | Type of Work <input type="checkbox"/> Bldg. <input type="checkbox"/> Highway <input type="checkbox"/> Resid. <input type="checkbox"/> Heavy |
| | Location of Project (city or other description) | | |
| | | | |
| Response To Request | County | | State |
| a. <input type="checkbox"/> Use area determination issued for this area | Address to which wage determination should be mailed. Must be complete and include ZIP Code. (Print or type) | | |
| b. <input type="checkbox"/> The attached decision noted below is applicable to this project | | | |
| Decision Number | | | |
| Date of Decision | | | |
| Expires | | | |
| Supersedes Decision Number | | | |
| Approved | | | |
| | Wage Survey by Agency Attached <input type="checkbox"/> YES <input type="checkbox"/> NO | Wage Survey by Agency in Progress <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| | Description of Work (Be specific) (Print or type) | | |
| | | | |
| | | | |
| | | | |
| | Other crafts | | |
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