

Subcontractor & Employee Information Form

Name of Prime Contractor: _____ Contract No./PO No _____

Company Address: _____

City/Town: _____

Telephone Number: _____ FAX: _____

Awarding Agency/ Procurement Contact _____

A contractor is required to provide to the Commissioner of Labor and Industry, Living Wage Unit, a list of Subcontractors working under this contract, on the day that work commences. Attach additional sheets as necessary.

Number of Sub-Contractors working on this contract, if applicable:

Sub-Contractor:	Phone Number:
Address:	City/Town
State & Zip Code	

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law? : \$	

Sub-Contractor:	Phone Number:
Address:	City/Town
State & Zip Code	

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law? : \$	

Subcontractor & Employee Information Form (Continued)

Sub-Contractor:	Phone Number:
Address:	City/Town
State & Zip Code	

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law? : \$	

Sub-Contractor:	Phone Number:
Address:	City/Town
State & Zip Code	

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law? : \$	

Sub-Contractor:	Phone Number:
Address:	City/Town
State & Zip Code	

Employee's Name:	Date of Hire:
Weekly Work Hours:	Employee Pay Rate per hour: \$
What was the hourly rate prior to the application of the Living Wage Law? : \$	

I understand that the employee information provided will be used by the Commissioner of Labor and Industry, Living Wage Unit, for the purpose of monitoring compliance with the Living Wage Law.

Person completing this form: _____

Title or Position: _____

Telephone Number: _____ Date Signed: _____