COMPLIANCE STATEMENT TO ACCOMPANY
CONTRACTOR'S WEEKLY PAYROLL

DT 1816 2001 (Replaces EC673)

Submit on copy to District Office

Wisconsin Department of Transportation

The willful falsification of any of the statements on this form may subject the contractor or subcontractor to civil or criminal prosecution. See Section 1001 of Title 18 and Section 231 of Title 31 of the United States Code.

No	Project	Contract	County	Payroll Period

Contractor Or Subcontractor	
Authorized Agents Name	Authorized Agents Title

I , the undersigned stated, do state that:

1. I pay, or supervise the payment of the persons employed by the above contractor or subcontractor on the above project. During the payroll period designated above all persons employed on said project have been paid the full weekly wage earned, except as noted in section1(a) below. No rebates have been or will be made either directly behalf of said contractor or subcontractor from the full weekly wages earned by any person. No deductions have been made either directly or indirectly from the full wage earned by any person, other that permissible deductions ass defined in Regulation, Part 3 (29CFR Subtitled A), issued by the Secretary of Labor under the Cope land Act, as amended (48 Stat. 948: 63 Stat. 108: 72 Stat. 357: 40 U.S.C 276c) and described in below section 1(b)

A) Exception Name Craft Explanation When will this person be paid?

B) **Description of Deductions**

2. Any payroll otherwise under this contract required to be submitted for the above period are correct and complete. The wage rates for laborers or mechanics contained are not less than the applicable wage rates contained in any wage determination incorporated into the contract. The classification set forth for each labored or mechanic conform with the work performed.

3. Any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with the State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exsists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

4. (A) **Where fringe benefits are paid to approved plan, funds, or programs**

_____ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above-referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate program for the benefit of such employees, except as noted in Section 4 (c) below.

(B) **Where fringe benefits are paid in cash**

___X___ Each laborer or mechanic listed in the above-referenced payroll has been paid as indicated on the payroll an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(C) **Exceptions** Craft Explanation

Remarks:

X _____

(Authorized Agent Signature) (Date)