

CONTRACTOR'S STATEMENT OF COMPLIANCE

PCN No.: \_\_\_\_\_

Project No: \_\_\_\_\_

Reporting Contractor: \_\_\_\_\_

Week Ending: \_\_\_\_\_  
(mo) (day) (yr)

Payroll Number: \_\_\_\_\_ (Ex. Put 1 for first project payroll)

<b>For SDDOT Use Only</b>
SDDOT Letting Date: _____
Wage Decision Date: _____
Reviewed by: _____

I, \_\_\_\_\_, \_\_\_\_\_ do hereby state:  
(Person Representing Reporting Contractor) (Title)

- That I pay or supervise the payment of the persons employed by the above-referenced Reporting Contractor at the referenced transportation construction project (Project).
- That during the work week commencing seven (7) days prior to, and ending on the above-referenced week ending date, each laborer and mechanic employed on the Project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of the above said Reporting Contractor, from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in 29 CRF Part 3, issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Start. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145) and described below: **(Please list ANY types of payroll deductions here, such as Federal Withholding, FICA, legal garnishments, etc.)**

- That any payrolls required to be submitted for the above week ending period are correct and complete; that the wage rates for laborers or mechanics therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth for each laborer or mechanic conform with the work he/she performed.
- That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a South Dakota apprenticeship agency recognized by the Bureau of Apprenticeship and Training (BAT), U.S. Department of Labor (USDOL), or if no such recognized agency exists in South Dakota, are registered with the BAT, USDOL.

- That,
  - WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, 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 programs for the benefit of such employees, except as noted in Section 5(c) below.
  - WHERE FRINGE BENEFITS ARE PAID IN CASH**  
 - 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 5(c) below.

c) EXCEPTIONS: \_\_\_\_\_  
\_\_\_\_\_

6. That (REMARKS): \_\_\_\_\_  
\_\_\_\_\_

Signed and dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Name and Title	Signature
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The willful falsification of any of the above statements may subject the contractor or subcontractor to civil or criminal prosecution under Section 1001 of Title 18 and Section 231 of Title 31 of the United States Code. **Send signed Contractor's Statement of Compliance with weekly Certified Payroll Report to: SDDOT Labor Compliance, 700 E Broadway Avenue, Pierre SD 57501-2586.**

SDDOT Payroll Forms available at: <http://www.sddot.com/labor.asp>