**PAYROLL DATES**

Prevailing Wage Law

Instructions to the Contractor: Please read the following and provide the required information noted on this form. This document must be submitted on or before your company begins any work under a contract for Cuyahoga Community College. This requirement is also applicable to your subcontractors. Please make a copy of this document available to them. The prevailing wage laws state that contractors are responsible for their subcontractors.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will begin performance under contract on the

(Name of Contractor)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ project on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Name of project and location) (Start date)

and conclude work on said project on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Ending date, if known)

In accordance with Section 4115.071(C) of the Ohio Revised Code, listing of payroll dates, I hereby submit the following schedule of dates that my company is required to pay wages for its workers while on this project.

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| **Subcontractor** | **Pay Dates** |
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NOTE: If the life of the project is expected to be over (3) months in length, provide only the days of the week your pay period starts and ends, plus the day you pay your workers.

Day Pay Period Starts: \_\_\_\_\_\_\_\_\_\_\_\_\_ Day Pay Period Ends: \_\_\_\_\_\_\_\_\_\_\_\_\_ Pay Day: \_\_\_\_\_\_\_\_\_\_\_\_\_

I acknowledge that I am required by section 4115.071(C) of the Ohio Revised Code that I must submit a copy of my company’s certified payroll records for this project within two weeks of the initial pay date listed above. I further acknowledge that I am responsible to collect and submit my subcontractors’ prevailing wage documents, including their certified payroll records in accordance with the law.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Contractor Signature and Title) (Company Name)

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(Date)