

104 North Riverside, Edgewater, Florida 32132

City of Edgewater

Community Development Block Grant Labor Standards Policy and Procedures



104 NORTH RIVERSIDE, EDGEWATER, FLORIDA 32132

EDGEWATER

DAVIS BACON PROCEDURES

CDBG PROGRAM

The following CDBG Procedures are utilized in the governance of

Davis-Bacon and Labor Standards Compliance the City's CDBG Projects:

- 1. The City will set up and maintain a Labor Standards Compliance file for each of its Federally funded grants.
- 2. The City and its Grant Administrator will utilize its Labor Standards Compliance Checklist to ensure compliance with Davis-Bacon (regarding payment of the prevailing wage rate), Contract Work Hours and Safety Act (regarding payment of time and a half), and Anti-Kickback Act of 1986 (regarding deductions of employee payroll).
- 3. Following the receipt of FloridaCommerce's approval of the full environmental review, and subsequent issuance of the Authority to Use Grant Funds, AND the Project Engineer's completion of the bid documents (plans and specifications) and approval of these bid documents by FloridaCommerce, the City and or it Grant Administrator access and download the proper wage decision(s) from the SAM.gov website.
- 4. The Grant Administrator provides the wage decisions to the Project Engineer and to the City's Project Coordinator.
- 5. The Project Engineer inserts the wage decisions into the Invitation to Bid (ITB) document's specifications and finalizes the ITB package. The City then forwards the ITB to FloridaCommerce and once approves utilizes the ITB with the included wage decision to solicit bids for selecting the Prime Construction Contractor.
- 6. The City holds a Pre-Bid Conference where requirements and responsibilities for compliance with Davis-Bacon (regarding payment of the prevailing wage rate), Contract Work Hours and Safety Act (regarding payment of time and a half), and Anti-Kickback Act of 1986 (regarding deductions of employee payroll) are discussed with the attending contractors. Section 3 requirements are discussed during this meeting as well. Ten days prior to bid opening, the



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Grant Administrator checks the wages decision(s) in SAM.GOV to ensure that there have been no updates to the decision(s). If there have, the City with execute a change order with the contractor as a part of the award and construction contracting.

- 7. Following the City's solicitation for the Construction Prime Contractor, receipt of and opening of bids, confirmation that the selected contractor is not on the Excluded Parties List (review of company in SAM.gov, and approval of the City Commission contingent on FloridaCommerce approval of the procurement, and Notice of Award, a Pre-Construction meeting is held with the selected Prime Construction Contractor. The City and or its Grant Administrator will inform the awarded Prime Construction Contractor of the requirements and its responsibilities of compliance with Davis-Bacon (payment of the prevailing wage rate), Contract Work Hours and Safety Act (payment of time and a half), and Anti-Kickback Act of 1986 (deductions of employee payroll). Additionally, the City and or its Grant Administrator reaffirms with the Prime Construction Contractor the requirements to:
 - a. submit Prime Contractor Notification of Participation and Certifications (Form PCN),
 - b. submit printout from SAM.GOV, showing the Prime Construction Contractor is not on the Excluded Parties List,
 - c. submit weekly submit payrolls using Form WH-347 (Attachment A of this Policy),
 - d. acquire and submit Sub-contractor Notification of Participation and Certifications (Form SCN),
 - e. acquire and submit printout(s) from SAM.GOV, showing the Sub-Contractor(s) is/are not on the Excluded Parties List,
 - f. require all sub-contractors working on the project to submit weekly payrolls using Form WH-347 (*Attachment A of this Policy*),
 - g. post the established and confirmed Wage Decisions on a job board at the job site, and
 - h. post the WH-1321 Workers Rights Under Davis Bacon poster (Attachment G of this *Policy*) on a job board at the job site.
- 8. The Grant Administrator checks to ensure that the contract award date is within 90 days of the bid opening. In cases when the award date is more than 90 days, the Grant Administrator checks to ensure that the Wage Decision(s) have not been amended or superseded. In instance where the Wage Decision(s) have been amended or superseded, the Grant Administrator provides the updated Wage Decision(s) to the City, the Project Engineer, and the Prime Construction Contractor. The construction contract, if executed is amended by change order to include the updated Wage Decision(s).



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- 9. The Grant Administrator's Labor Standards Compliance staff person continues ongoing communications with the Prime Construction Contractor to ensure weekly payrolls from the Prime Construction Contractor and Sub-Contractor(s) are submitted from the point in time outlined as the commencement date in the Notice to Proceed. (Note: in some instances, the Construction Contractor does not immediately mobilize and begin work following the award and contracting due to circumstances such as delays with materials).
- 10. The Grant Administrator's Labor Standards Compliance staff person reviews the weekly payrolls to ensure:
 - a. Proper wages (including fringe benefits) are being paid to the workers based on their work classifications.
 - b. Overtime is being paid at a rate of 1.5 times the wage rate for time over 40 hours per weeks on the project,
 - c. Payroll deductions are bona fide and are not kickbacks to the Construction Contractor from the worker (e.g. Wage Decision requires that a worker be paid \$20.00 per hour, and the Contractor pays the worker the \$20.00 per hour, which for a 40-hour week would total \$800.00, but makes a non-bona fide deduction of \$150.00 for that week that brings the worker's hourly rate down to \$16.25);
 - d. Payrolls are certified by an officer or person authorized by an officer of the firm;
 - e. No Helper classifications are included in the payrolls,
 - f. That instances where there are workers classified in the payroll as Trainees or Apprentices, there is documentation that each such worker is participating in a formal program approved by the Agency for Workforce Innovation or the U.S. Department of Labor and is being paid according to the requirements of that program.
 - g. Classifications presented by the Construction Contractor in the submitted payrolls align with those in the Wage Decisions.
- 11. In instances where classifications presented in the payrolls are not listed in the Wage Decision(s), the Grant Administrator's Labor Standards Compliance staff person will make a request for Additional Classification from the U.S. Department of Labor (DOL) <u>Additional Classifications (dol.gov)</u> through the City's FloridaCommerce grant manager, utilizing a completed Form SF1444-23 (*Attachment B to this Policy*).
- 12. In instances where the City/FloridaCommerce is unable to obtain a wage rate through their request for an additional classification, the contractor/subcontractor Employee/Employer Wage-Scale Agreement (Attachment C to this Policy).



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- 13. In instances where the City or the Grant Administrator's Labor Standards Compliance staff find underpayments, non-compliance with overtime pay, or unsupported deductions, communications will be held with the Construction Contractor to remediate the areas of non-compliance and to ensure that wage restitutions are made, are documented with copies of cancelled checks and an Employee Confirmation of Restitution Payment Received (Attachment D to this Policy Example). In instances where the worker was not paid time and a half for overtime, calculate Liquidated Damages at \$27 for each calendar day on which an individual did not receive the required overtime compensation. In instances when the cumulative wage restitutions are \$50.00 or more, a Wage Restitution and Liquidated Damages Form (Attachment E to this Policy) is to be submitted to the Department of Labor, through the FloridaCommerce Grant Manager. Labor Standards non-compliance incidences, including infractions, restitutions, liquidated damages, reporting and compliance will be tracked in the City's Labor Standards Non-Compliance Tracking Sheet.
- 14. Contractors found to be in non-compliance with Labor Standards requirements that have not brought the issues into compliance shall not be paid until such issues have been brought into compliance.
- 15. The City's Grant Administrator's Labor Standards Compliance staff person will provide FloridaCommerce with any requested information for their reporting to DOL and for monitoring of Labor Standards.
- 16. The City shall maintain Labor Standards documentation per the CDBG Subgrant Agreement's Records Retention requirements, which is six years following the closeout of the CDBG subgrant agreement.

Onsite Field Work

- 17. The Grant Administrator's Labor Standards Compliance staff will:
 - a. At points in time during the construction period when the maximum number of construction workers of the prime and subs are on site, will conduct field interviews with workers which cover a representative sample of the classifications used to perform the work.
 - b. Review the information in the interviews with the payroll records to ensure consistency with the payroll records.



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- c. In cases where there are any apparent inconsistencies, particularly in the areas of hourly rate and classification compared to work performed/tools used, take action and communications with the contractor(s) in question to resolve the inconsistency and will document the resolution in the City's CDBG Labor Standards files.
- d. Inspect construction boards or other posting options to ensure the correct wage decision(s) and appropriate labor documentation posted, including a WH-1321 Workers Rights Under Davis Bacon poster (*Attachment G of this Policy*), are posted at the work site.
- e. Take photographs of the wage decision posting from positions showing all postings as well as close up shots legibly showing the wage decision(s).



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City of Edgewater

Community Development Block Grant Compliance Review Checklist Labor Standards Policies and

Procedures



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104 North Riverside, Edgewater, Florida 32132

Labor Standards Compliance Checklist

PROJECT:		
	CT NUMBER:	
PRIME CONTRA	ACTOR:	
	SUB-CONTRACTORS:	
	1	
	2	
	3	
	4	
	5	

Section I provides review items that ensure the correct wage decision is in place for the project and that the contractor understands their labor standards responsibilities. This section is to be completed prior to the implementation of the construction activities.

Section II provides review items that ensure that ongoing proper reviews of payrolls are conducted weekly and that actions are taken to bring non-compliance issues into compliance. This section is to be completed on a weekly basis.

Section III provides review items for field inspections and worker interviews that further ensure compliance with worker classifications and hourly pay rates. This section is to be completed at a time when the maximum cross section of workers will be on site. This may require more than one visit.



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I. Wage Decision and Construction Contract Award

Community: _____

Prime Contractor: ______

Total Contract Amount: \$_____

Period Covered:

Date Reviewed:

Contract Number: _____

Pay Request Number: _____

Pay Request Amount: \$_____

Reviewer/Monitor: Melissa Fox

	Assessment Questions	Yes	No
1.	Original wage decision(s) numbers Obtained from SAM.gov?		
2.	Date of original Wage Decision(s) Obtained from Sam.gov?		
3.	Date of Bid Opening?		
4.	Date of Award?		
5.	Is the Award Date within 90 days of Bid Opening?		
6.	If the Award Date is 90 days or more, was there a check in		
	SAM.gov made to see if an updated Wage Decision(s)		
	was/were required?		
7.	Was there a need for updated Wage Decision(s)?		
8.	If updated Wage Decision(s) was necessary, was it obtained		
	from SAM.gov and provided to the contractor?		
9.	If Updated Wage Decision(s) was needed, what are the		
	updated Wage Decision Numbers?		
10.	Was a check in SAM.gov completed to ensure the contractor		
	was not on the Excluded Parties List?		
11.	Was the contractor on the Excluded Parties List? (should be		
	NO)		
12.	Print a copy of the SAM.gov page showing the company is		
	registered and not on the excluded parties list? Placed in File?		
13.	Did Prime Contractor provide a notification(s) as a Prime		
	Contracting and contracting with Sub-Contractor(s)		
	(See Notifications Forms PCN and SCN?)		



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II. Construction Payroll Review

Community: _____

Prime Contractor:

Total Contract Amount: \$_____

Period Covered:

Reviewer/Monitor: Melissa Fox

Contract Number: _____

Pay Request Number: _____

Pay Request Amount: \$_____

Date Reviewed:

	Assessment Questions	Yes	No	Notes/Explanations
1.	Have weekly payrolls been provided by the prime and all sub-contractors on Form WH-347 (<i>Attachment A</i>)?			
2.	Were each of the weekly payrolls certified by an officer or person having authority to make such certifications?			
3.	Were the job classifications outlined in the weekly payroll reports included in the wage decision?			
4.	If there were job classification(s) not included in the Wage Decision (s), was a request made to the Department of Labor (DOL) for additional classification? If not, prepare a Request for Additional Classification (Standard Form 1444) and send to Department of Labor through FloridaCommerce. (Attachment B)			
5.	If a wage amount was not provided by DOL, did the contractor and employee needed the additional classification sign a Davis Bacon Employee Employer Wage Scale Agreement? (Attachment C)			



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	Assessment Questions	Yes	No	Notes/Explanations
6.	Were all workers paid the amounts			
	outlined in the Wage Decision(s) for the			
	classification of work they were doing?			
7.	For workers working overtime on the			
	project, were the workers paid time and			
	a half for these overtime hours?			
	If not, calculate liquidated damages			
	amount at \$32.00 per calendar day and			
	place amount(s) in Notes/Explanations			
	section.			
8.	If a payroll includes workers classified as			
	"apprentice" or "trainee," is there			
	documentation that each such worker is			
	participating in a formal program			
	approved by the Agency for Workforce			
	Innovation or the U.S. Department of			
	Labor and is being paid according to the			
	requirements of that program?			
9.	Are there workers in a "helper"			
	classification, which cannot be used? (If			
	not qualified as "apprentice" or			
	"trainee," they are either a laborer or			
	full trade classification, depending on			
	tools used.)			
10.	If fringe benefits are claimed, are they			
	bona fide fringe benefits, has the hourly			
	value of each fringe been documented,			
	and does the calculation appear			
	correct? Note: Generally, a fringe			
	benefit is bona fide if it is paid by the			
	employer to a third party for the benefit			
	of the employee.			
11.	Was a review completed of the payroll			
	deductions and was proper			
	documentation provided to ensure that			
	the deduction was not a kick-back?			



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	Assessment Questions	Yes	No	Notes/Explanations
12.	Was a need for wage restitution			
	identified?			
13.	If the need for wage restitution was			
	identified, do the files document that			
	restitution was paid by including a			
	copy(ies) of the front of the check(s) and			
	a statement(s) from the affected			
	worker(s) that the restitution was			
	received - Employee Confirmation of			
	Restitution Payment Received (Example			
	Attachment D)?			
14.	If cumulative restitution exceeding \$50			
	was paid by any contractor or			
	subcontractor, has an enforcement			
	report been esnt to FloridaCommerce			
	using the Wage Restitution and			
	Liquidated Damages Form (Attachment			
	<i>E</i>)?			

Review and Certification:

I, Melissa Fox certify that I have reviewed the above referenced CDBG project on _

Date

for Labor Standards Compliance and I further certify the files reviewed are:

In Compliance

_____ Not in Compliance - For areas found to be in non-compliance, the following actions have been taken:

Melissa Fox, Labor Standards Compliance Officer

Date



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III. Field Reviews	
Community:	Contract Number:
Prime Contractor:	Pay Request Number:
Total Contract Amount: \$	Pay Request Amount: \$
Period Covered:	

Reviewer/Monitor: Melissa Fox

Date Reviewed:

	Assessment Questions	Yes	No	Notes/Explanations
1.	Were interviews conducted using			
	HUD Form 11 (Attachment F) with			
	workers which cover a			
	representative sample of the			
	classifications used to perform the work?			
2.	Is the information in the			
	interviews consistent with the			
	payroll records or is there			
	documentation resolving any			
	apparent inconsistencies,			
	particularly in the areas of hourly			
	rate and classification compared			
	to work performed/tools used?			
3.	If the hourly rates in the certified			
	payrolls and the hourly rates			
	stated by the workers during the			
	interviews do not agree, request			
	timecards and printouts from the			
	contractor's payroll accounting			
	system. If it is determined that a			
	wage restitution is needed, follow			
	numbers 12, 13 and 14 of Section			
	II of this checklist.			



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	Assessment Questions	Yes	No	Notes/Explanations
4.	Is the wage decision and			
	appropriate labor documentation			
	posted at the work site?			
5.	Is the WH-1321 Workers Rights			
	Under Davis Bacon poster posted			
	at the work site? (Attachment G)			
6.	Were photographs taken			
	confirming the posting of the			
	wage decision(s) and WH-1321			
	poster? Photographs should be			
	taken up close showing the wage			
	decisions poster and from far			
	enough back to show that they are			
	posted at the job site.			

Review and Certification:

I, Melissa Fox certify that I have reviewed the above referenced CDBG project on

Date

for Labor Standards Compliance and I further certify the files reviewed are:

In Compliance

_____ Not in Compliance - For areas found to be in non-compliance, the following actions have been taken:

Melissa Fox, Labor Standards Compliance Officer

Date

City of Edgewater DAVIS BACON ACT WAGE DETERMINATION 10-DAY CALL FORM

The Contract	
Subrecipient Name:	
Contract No. and	
Ten Day Call Information	
Person Verifying the Wage Determination:	
Verification Method (Call, Check DOL	
Date of Verification:	
Wage Determination Verification	
A	В
A Type of work to be done	B Type of work to be done
Wage Determination that was made part of the original bid documents	Wage Determination that was made part of the original bid documents
Current Determination based on DOL	Current Determination based on DOL
Action Taken: None Addendum	Action Taken: None Addendum
Comments:	
Signature:	



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City of Edgewater Notification of Participation and Certifications For Prime Contractor and Sub-Contractor(s)

NOTIFICATION AND CERTIFICATIONS OF PROJECT PRIME CONTRACTOR

CITY CDBG PROJECT NAME:		
CDBG CONTRACT NUMBER:		
CITY'S PROJECT CONTACT:		
CITY PROJECT CONTACT PHO	NE #:	EMAIL:
PRIME CONTRACTOR INFOR	MATION	

Company Name	
Company's Unique Entity ID:	
Address of Sub-Contractor:	
Phone Number of Sub-Contractor:	
Email Address of Sub-Contractor:	
Primary Project Contact for Sub-Contra	

PRIME CONTRACTOR NOTIFICATION AND CERTIFICATIONS

I, _____, with _____, do hereby confirm and attest that our company has been selected as the prime contractor by the City of Edgewater, for the above-referenced project.

Additionally, as a representative of ______, I do hereby certify that:

- 1) Our company is registered on SAM.GOV,
- Our company nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency,
- 3) Our company is aware that the project is funded with Federal funds requiring compliance with:
 - a. Davis-Bacon (regarding payment of the prevailing wage rate),
 - b. Contract Work Hours and Safety Act (regarding payment of time and a half),
 - c. Anti-Kickback Act of 1986 (regarding deductions of employee payroll), and
 - d. Section 3 requirements.
- 4) Our company agrees to comply with, provide the City or its agents required documentation for, and maintain and retain all required records and documentation for this project for six years following the closeout of the City's CDBG agreement with the State of Florida.
- 5) Specifically, our company understands that it must:
 - a. Pay workers on the project the prevailing wage rates as determined by the wage decision(s) in place for the project,
 - b. Pay time and half to all workers exceeding 40 hours per week on the project,
 - c. Submit weekly certified payrolls to the City or its agent using Form WH-347,

NOTIFICATION AND CERTIFICATIONS OF PROJECT PRIME CONTRACTOR

- d. Make reasonable efforts to hire Section 3 employees when our company needs to hire additional positions is needed for the project by contacting and or placing notices of employment opportunities with:
 - i. local workforce boards,
 - ii. public housing facilities,
 - iii. One-Stop Career Centers,
 - iv. Other appropriate centers serving low-income Section 3 persons, and
 - v. City Hall.
- e. Provide documentation to the City of our company's outreach efforts, when we are hiring new positions, to hire Section 3 workers.
- f. Provide documentation to the City of our company's accomplishments of hiring Section 3 workers OR of being a Section 3 business.
- g. Provide explanation for not meeting targeted Section 3 goals.

Certified by: _	Signature Here	Date:	
	Name of Signer and Title for Prime Contractor		

 Confirmed by:
 Signature Here
 Date:

 Name of Signer and Title for City
 Date:

NOTIFICATION AND CERTIFICATIONS OF PROJECT SUB-CONTRACTOR

SUB-CONTRACTOR INFORMATION

Company Name	
Company's Unique Entity ID:	
Address of Sub-Contractor:	
Phone Number of Sub-Contractor:	
Email Address of Sub-Contractor:	
Primary Project Contact for Sub-Contract	tor:
Prime Contractor:	

SUB-CONTRACTOR NOTIFICATION AND CERTIFICATIONS

١,	,, with
d	lo hereby notify the City of Edgewater that our company has been selected as a sub-contractor
b	ργ

_____, the prime contractor, for the above-referenced project.

Additionally, as a representative of ______, I do hereby certify that:

- 1) Our company is registered on SAM.GOV,
- 2) Our company nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency,
- 3) Our company is aware that the project is funded with Federal funds requiring compliance with:
 - a. Davis-Bacon (regarding payment of the prevailing wage rate),
 - b. Contract Work Hours and Safety Act (regarding payment of time and a half),
 - c. Anti-Kickback Act of 1986 (regarding deductions of employee payroll), and
 - d. Section 3 requirements.
- 4) Our company agrees to comply with, provide the City or its agents required documentation for, and maintain and retain all required records and documentation for this project for six years following the closeout of the City's CDBG agreement with the State of Florida.
- 5) Specifically, our company understands that it must:
 - a. Pay workers on the project the prevailing wage rates as determined by the wage decision(s) in place for the project,
 - b. Pay time and half to all workers exceeding 40 hours per week on the project.

NOTIFICATION AND CERTIFICATIONS OF PROJECT SUB-CONTRACTOR

- d. Make reasonable efforts to hire Section 3 employees when our company needs to hire additional positions is needed for the project by contacting and or placing notices of employment opportunities with:
 - i. local workforce boards,
 - ii. public housing facilities,
 - iii. One-Stop Career Centers,
 - iv. Other appropriate centers serving low-income Section 3 persons, and
 - v. City Hall.
- e. Provide documentation to the City of our company's outreach efforts, when we are hiring new positions, to hire Section 3 workers.
- f. Provide documentation to the City of our company's accomplishments of hiring Section 3 workers OR of being a Section 3 business.
- g. Provide explanation for not meeting targeted Section 3 goals.

Certified by: _	Signature Here	Date:	
	Name of Signer and Title for Sub-Contractor		
Confirmed by:	Signature Here	Date:	

Name of Signer and Title for Prime Contractor

Notification of Contracting and Certifications - Form SCN



City of Edgewater, Florida 104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachments A-G & **Non-Compliance Tracking Sheet** То Labor Standards Policies and **Procedures**



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City of Edgewater Attachment A WH-347 - Certified Payroll Form

То

Labor Standards Policies and Procedures



U.S. Department of Labor

PAYROLL

Wage and Hour Division

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

NAME OF CONTRACTOR OR SUBCONTR	RACTOR		,					ADDRES			,					OMB No. 1 Expires 09/	235-0008 30/2026
PAYROLL NO. FOR WEEK ENDING		PROJECT AND LOCATION PROJECT OR CONTRACT NO.															
(1)	(2) NNC NIC	(3)	:ST.	(4)	DAY ANI	D DATE		(5)	(6)	(7)			DED	(8) DUCTIONS			(9)
NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	NO. OF WITHHOLDING EXEMPTIONS	WORK CLASSIFICATION	OT. OR	HOURS	WORKEI	D EACH	H DAY	TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	FICA	WITH- HOLDING TAX			OTHER	TOTAL DEDUCTIONS	NET WAGES PAID FOR WEEK
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While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date (Name of Signatory Party) (Title) do hereby state: (1) That I pay or supervise the payment of the persons employed by on the (Contractor or Subcontractor) ; that during the payroll period commencing on the (Building or Work) dav of , and ending the day of , , all persons employed on said 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 said from the full (Contractor or Subcontractor) 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 Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below: (2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete: that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed. (3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

with the Bureau of Apprenticeship and Training, United States Department of Labor.

 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 4(c) below.

(b) 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 4(c) below.

c) EXCEPTION:	S
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(

EXCEPTION (CRAFT)	EXPLANATION
REMARKS:	·
	1
NAME AND TITLE	SIGNATURE
THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STA SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. S TITLE 31 OF THE UNITED STATES CODE.	



City of Edgewater, Florida 104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachment B **Request for Additional** Classifications Standard Form 1444 То Labor Standards Policies and **Procedures**

Request For Authorization Of Additional Classification And Rate	🗌 Ser	Appropriate vice Contra	ct	APPA (2004) (2014) (2014)		mber: 9000-0066 5/31/2025
Instructions: The Contractor shall comp the request, in quadruplicate, to the Contr			h 16, kee	ep a pend	ing copy,	and submit
1. To: Administrator, Wage And Hour Division U.S. Department Of Labor Washington, DC 20210		2. From: (Reportin	g Office)		
3. Contractor				ľ	4. Date (Of Request
5. Contract Number 6. Date Bid Opened (Sealed Bidding)	7. Dat Aw	te Of ard	1000 000 0000 0000 0000 0000 0000 0000	Contract Started	(If Ap	Option Exercised oplicable) (Service ract Only)
10. Subcontractor (If Any)	1					
11. Project And Description Of Work (Att	tach Ad	ditional She	et If Nee	ded)		
 12. Location (City, County, And State) 13. In Order To Complete The Work Pro Establish The Following Rate(s) For Of Labor Determination Number: a. List In Order: Proposed Classification 	The Inc	licated Clas Da	sification ated:		cluded Ir	11-14-14 AC
Description(s); Duties; And Rationale Classifications (Service contracts onl	For Pro		5. 000		(3) [0.	Payments
(Use reverse or attach additional sheets,		ssary)				
14. Signature And Title Of Subcontracto Representative (If Any)	r	15. Signa Repre	ture And sentative		Prime Cor	ntractor
Authorized For Local Reproduction Previous Edition Is Not Usable						44 (REV. 10/2023) (48 CFR) 53.222(f)

16. Signature Of Employee Or Representative	Title	Check Appropriate Box -
		Referencing Block 13.
		Agree Disagree

To Be Completed By Contracting Officer (Check As Appropriate - See FAR 22.1019 (Service Contract Labor Standards) Or FAR 22.406-3 (Construction Wage Rate Requirements))

The Interested Parties Agree And The Contracting Officer Recommends Approval By The Wage And Hour Division. Available Information And Recommendations Are Attached.

The Interested Parties Cannot Agree On The Proposed Classification And Wage Rate. A Determination Of The Question By The Wage And Hour Division Is Therefore Requested. Available Information And Recommendations Are Attached.

(Send 3 copies to the Department of Labor)

Signature Of Contracting Officer Or Representative	Title And Commercial Telephone Number	Date Submitted
---	--	----------------

Paperwork Reduction Act Statement

This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 9000-0066. We estimate that it will take .5 hours to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: U.S. General Services Administration, Regulatory Secretariat Division (M1V1CB), 1800 F Street, NW, Washington, DC 20405.



104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachment C Employee/Employer Wage-Scale Agreement To Labor Standards Policies and Procedures

Edgewater Employee/Employer Wage-Scale Agreement

City of Edgewater, Florida

CDBG Contract Number:_____

Construction Contract Execution Date:

Wage Decision Number:

Project Description:

Whereas, the <u>City of Edgewater</u> has been unable to obtain a specific wage rate from the Department of Labor (DOL)/Florida Department of Commerce (FloridaCommerce), in the wage decision for this project for the classification of (Type in the classification), and because it also appears that there are no readily available similar positions that could be reclassified under the initial wage decision, and whereas 29 CFR Part 5.5(a)(I)(ii) allows the rate for a classification under these circumstances to be set by mutual agreement among the employee(s), the employer, and the jurisdiction, subject to approval by HUD/DOL;

Therefore, by mutual consent, the parties and persons signed below agree to an hourly rate of \$ and fringe benefit rate of \$ (benefits may be included in hourly rate), for the above classification, while acknowledging full compliance with all other federal labor standards requirements.

Employee Signature

Employer Signature (If a corporation, an officer must sign.)

Date

Date

List the name and mailing address of the **City of Edgewater's** representative to whom the DOL approval of the wage-scale agreement should be mailed in the form fields below.

City of Edgewater Attention: Sandy Camp, Grant Administrator 104 North Riverside , Edgewater, Florida 32132

Request submitted by:

Date: _____

Note: Use one form for each affected employee. Use the Tab key to move between fields to complete the form. Sign and date by hand.



City of Edgewater, Florida 104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachment D Employee Certification of Payment of Restitution and or Liquidated Damaged To Labor Standards Policies and

Procedures

Date

City of Edgewater Attention Sandy Camp, Grant Administrator 104 North Riverside, Edgewater, Florida 32132 scamp@cityofedgewater.org

RE: Wage Restitution for *Employee Name* City of Edgewater – CDBG Project Number *xxxxx Description of Project*

Dear Ms. Camp:

Please accept the this letter as my confirmation that I have received check number *xxxxx* (copy of cleared check attached) in the amount of *\$xxx.xx* from my employer, *name of the contractor or subcontractor*. This payment covers the restitution for wages owed to me for my work at the above referenced project on the week(s) ending xx/xx/xxxx.

Sincerely,

Name of the Employee Receiving Restitution Employee's Address Employee's City, State and Zip Code Employee's last four numbers of social security number



City of Edgewater, Florida 104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachment E Wage Restitution And Liquidated Damages Form To Labor Standards Policies and **Procedures**

TO: FloridaCommerce CDBG Program FROM:	
Recipient: Contract Number:	
Contractor's Name: Prime	Subcontractor
Wage Decision Number(s):	
Wage restitution in the total amount of \$ has been paid to	_ employees of the vertime, is attached.
1. The need for wage restitution was discovered through:	
 2. Types of violations: Did not pay the minimum for the classification Used the incorrect classification. Did not pay overtime premium. Other 	
3. Were any of the violations willful? (If <i>yes</i> , attach supporting information.)	Yes No
4. Are administrative sanctions recommended? (If <i>yes</i> , attach supporting information.)	Yes No
5. If the contractor failed to pay the overtime premium, what is the total liquidated damages assessed (\$32.00/day/employee):	\$
 Are you recommending waiver of liquidated damages? (If <i>yes</i>, explain why below. If a waiver is recommended, the collection of liquidated damages can be delayed until a decision is made.) 	Yes No

Signature

Date

(A report is required for any contractor accumulating \$50 or more of wage underpayments throughout the life of the project. The CDBG Program must report wage restitution data to the U.S. Department of Housing and Urban Development twice each year. If a contractor owes restitution of \$1,000 or more, a copy of this report is sent to the U.S. Department of Labor in compliance with 29CFR5.7(2), which states, "Where underpayments by a contractor or subcontractor total \$1,000 or more, or where there is reason to believe that the violations are aggravated or willful (or, in the case of the Davis-Bacon Act, that the contractor has disregarded its obligations to employees and subcontractors), the Federal agency shall furnish within 60 days after completion of its investigation, a detailed enforcement report to the Administrator.")

Instructions for Completing the Wage Restitution Enforcement Report Form

This form is created as a Word form. You can complete it on a computer, using the "Tab" key to move between form fields to complete the report. You can also print out the form and complete it by hand.

Complete one report for each contractor that has to make wage restitution of \$50 or more.

Enter the name and title of the person making the report and the date of the report.

Next, enter the Recipient government's name and the contract number of the subgrant agreement.

Enter the contractor's name and check whether the contractor was the prime contractor or a subcontractor.

Enter the wage decision(s) involved in the restitution, the total amount of restitution paid, and the number of employees receiving restitution.

Question 1.	Explain how the	e need for	restitution	was discovered.
-------------	-----------------	------------	-------------	-----------------

- Question 2. Check the type of violation that occurred. If you check "Other," explain on the line provided.
- Question 3. Check whether the contractor willfully paid wages that were lower than the applicable wage decision. If you have information that the contractor knowingly underpaid employees and checked "yes," attach documentation with the report form.
- Question 4. If you are recommending sanctions for the contractor, check "yes" and supply documentation to support the recommendation.
- Question 5. If the contractor failed to pay the required overtime premium, calculate the liquidated damages at \$32 per day per employee.
- Question 6. If you recommend that the contractor have the liquidated damages waived, check "yes" and explain in the box provided.

Sign and hand date the form at the bottom.



104 North Riverside, Edgewater, Florida 32132

City of Edgewater

Attachment F

Record of Employee Interviews

То

Labor Standards Policies and Procedures

Instructions

General:

This form is to be used by HUD and local agency staff for recording information gathered during on-site interviews with laborers and mechanics employed on projects subject to Federal prevailing wage requirements. Typically, the staff that will conduct on-site interviews and use this form are HUD staff and fee construction inspectors, HUD Labor Standards staff, and local agency labor standards contract monitors.

Information recorded on the form HUD-11 is evaluated for general compliance and compared to certified payroll reports submitted by the respective employer. The comparison tests the veracity of the payroll reports and may be critical to the successful conclusion of enforcement actions in the event of labor standards violations. The thoroughness and accuracy of the information gathered during interviews is crucial.

Note that the interview itself and the information collected on the form HUD-11 are considered confidential. Interviews should be conducted individually and privately. All laborers and mechanics employed on the job site must be made available for interview at the interviewer's request. The employee's participation, however, is voluntary. Interviews shall be conducted in a manner and place that are conducive to the purposes of the interview and that cause the least inconvenience to the employer(s) and the employee(s).

Completing the form HUD-11:

Items 1a - 1c: Self-explanatory

Items 2a – 2d: Enter the employee's full name, a telephone number where the employee can be reached, and the employee's home address. Many construction workers use a temporary address in the locality of the project and have a more permanent address elsewhere from which mail may be forwarded to them. Obtain a more permanent address, if available. Ask the employee for a form of identification (e.g., driver's license) to verify their name.

Items 3a – 4c: Enter the employee's responses. Ask the employee whether they have a pay stub with them; if so, determine whether the pay stub is consistent with the information provided by the employee.

Items 5 – 7: Be certain that the employee's responses are specific. For example, job classification (#5) must identify the trade involved (e.g., Carpenter, Electrician, Plumber) – responses such as "journeyman" or "mechanic" are not helpful for our purposes.

Items 8 - 12b: Self-explanatory

Items 13 – 15c: These items represent some of the most important information that can be gathered while conducting on-site interviews. Please be specific about the duties you observed the employee performing. It may be easiest to make these observations before initiating the interview. Please record any comments or remarks that may be helpful. For example, if the employee interviewed was working with a crew, how many workers were in the crew? Was the employee evasive?

The level of specificity that is warranted is directly related to the extent to which interview(s) or other observations indicate that there may be violations present. If interviews indicate that there may be underpayments involving a particular trade(s), the interviewer is encouraged to interview as many workers in that trade(s) that are available.

Items 16 - 17b: The information on the form HUD-11 may be reviewed for general compliance, initially. For example, are the job classification and wage rate stated by the employee compatible with the classifications and wage rates on the applicable wage decision? Are the duties observed by the interviewer consistent with the job classification?

Item 18: Please place here any additional information you may want to document or continuing information from other lines that do not fit in their block space.

Once the corresponding certified payroll reports are received, the information on the HUD-11 shall be compared to the payroll reports. Any discrepancies noted between the HUD-11 information and that on the payroll report shall be noted in Item 16, Remarks. If discrepancies are noted, follow-up actions to resolve the discrepancies must be taken.

Form HUD-11 (05/2021)



U.S. Department of Housing and Urban Development

OMB Approval No. 2501-0009

Office of Davis-Bacon and Labor Standards

(exp. 12/31/2024)

The public reporting burden estimate for this collection of information is 15 minutes per response on average. This includes reviewing instructions, searching existing data sources, gathering, and maintaining the data, and completing the collection of information. This information may not be collected, nor are you required to provide, the information requested unless it displays a currently valid OMB control number. The information collected ensures compliance with the Federal labor standards through recording interviews with construction workers. The information collected ensures compliance with the Federal labor standards through recording interviews with construction workers. The information collected ensures compliance with the rederal labor standards through recording interviews with construction workers. The information collected ensures compliance with the rederal labor standards through recording interviews with construction workers. The information collected ensures collecting this information must maintain these records in a manner that protects the individuals on whom the information is maintained. The information collected herein is voluntary, and any information provided shall be kept confidential, but failure to provide the information collected may delay enforcement of any possible Federal labor standards violations if the information would have identified any. Comments concerning this burden statement, or this collection should be sent to: National Director, Office of Davis-Bacon and Labor Standards, 451 7th Street SW. Room 7108. Washington. DC 20410. When providing comments, please refer to OMB Approval 2501-0009

Pursuant to 5 U.S.C. § 552a(e)(3), this Privacy Act Statement serves to inform you of the following concerning the collection of the information on this form.

A. AUTHORITY: Collection of the information solicited on this form is authorized by the Davis-Bacon Act as promulgated through Department of Labor Regulations under 29 CFR Part 5. B. PURPOSE: The primary purpose for soliciting this information is to determine if the wages paid by an employer on a project covered by the Davis-Bacon Act are in compliance with federal labor standards.

C. ROUTINE USES: The information collected ensures compliance with the Federal labor standards through recording interviews with construction workers on topics related to wages paid on the project. The information is reviewed by HUD authorized personnel to ensure compliance with Federal labor standards under the Davis-Bacon Act on covered projects. If violations are found, the information collected is used to conduct enforcement actions to ensure restitution is paid to workers of covered projects are paid proper wages under the Davis-Bacon Act.
D. CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION: The information collection is voluntary. Refusing to give information will not impact your status with your employer or the government. Failure to provide the information will limit the ability of HUD to determine if you were paid proper wages under the Davis-Bacon Act, and will limit the ability for HUD to seek restitution for you in the event a violation is found.

1a. Project Name			2a. Employee Name						
1b. Project Number			2b. Employee Phone Number (including area code)						
1c. Contractor or Subcontractor (Employer)			2c. Employee Home Ad	dress & Zip Code					
			2d. Verification of identifi Yes No						
3a. How long on this job? 3b. Last date on this job before today? 3c. No. of hours last day on this job?		4a. Hourly rate of pay?	4b. Fringe Benefits? Vacation Yes Medical Yes Pension Yes	No No No	4c. Pay Yes	stub? No			
5. Your job classification	n(s) (list all) continue in	block 18 if necessary							
6. Your duties continu	ue in block 18 if necessar	У							
7. Tools or equipment us	sed continue in block 1	8 if necessary							
8. Are you an apprentice	e or trainee? Yes N	No 10. Are you p	baid at least time and $\frac{1}{2}$ for a	II hours worked in excess	of 40 in a weel	Yes</td <td>No</td>	No		
9. Are you paid for all ho	ours worked? Yes N	No 11. Have you	vever been threatened or co	erced into giving up any pa	art of your pay	? Yes	No		
12a. Employee Signatur	e		12b. Date						
13. Duties observed by t	the Interviewer (Please be	e specific.)							
14. Remarks continue	e in block 18 if necessary								
15a. Interviewer Name (Please Print) 15b. Signature of Interviewer			rviewer		15c. Date of Ir	nterview			
Payroll Examin	ation								
16. Remarks continue	e in block 18 if necessary								
17a. Signature of Payrol	Il Examiner			17b. Date					

Form HUD-11 (12/2021)

Attachment F

Form HUD-11 (12/2021)

Attachment F

(exp. 12/31/2024)

Record of Employee Interview

18. Additional Remarks



104 North Riverside, Edgewater, Florida 32132

City of Edgewater Attachment G Worker Rights - WH-1321 Poster To Labor Standards Policies and Procedures To Labor Standards Policies and Procedures

WORKER RIGHTS UNDER THE DAVIS-BACON ACT

FOR LABORERS AND MECHANICS WORKING ON FEDERAL OR FEDERALLY ASSISTED CONSTRUCTION PROJECTS

The law requires employers to display this poster where employees can readily see it.

PREVAILING WAGES	You must be paid not less than the wage rate listed in the Davis-Bacon Wage Decision posted with this Notice for the work you perform.
OVERTIME	You must be paid not less than one and one-half times your basic rate of pay for all hours worked over 40 in a work week. There are few exceptions.
ENFORCEMENT	Contract payments can be withheld to ensure workers receive wages and overtime pay due, and liquidated damages may apply if overtime pay requirements are not met. Davis-Bacon contract clauses allow contract termination and debarment of contractors from future federal contracts for three years. A contractor who falsifies certified payroll records or induces wage kickbacks may be subject to civil or criminal prosecution, fines and/or imprisonment.
APPRENTICES	Apprentice rates apply only to apprentices properly registered under approved Federal or State apprenticeship programs.
RETALIATION	The law prohibits discharging or otherwise retaliating against workers for filing a complaint, cooperating in an investigation, or testifying in a proceeding under the Davis-Bacon and Related
PROPER PAY	Acts.

If you do not receive proper pay, or require further information on the applicable wages, contact

the Contracting Officer listed below:

or contact the U.S. Department of Labor's Wage and Hour Division.



1-866-487-9243 TTY: 1-877-889-5627 www.dol.gov/whd



WH1321 REV 10/17



104 North Riverside, Edgewater, Florida 32132

City of Edgewater

Labor Standards

Non-Compliance Tracking Sheet

То

Labor Standards Policies and Procedures



104 North Riverside, Edgewater, Florida 32132 LABOR STANDARDS NON-COMPLIANCE TRACKING SHEET

PROJECT NAME: CDBG CONTRACT NUMBER: CDBG CONTRACT START AND END DATES:

		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
PRIME CONTRACTOR	<u> </u>	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
Incident	2										
Incident	3										
Incident	4										
Incident	5										
Incident	6										
		•		- 1 - 1			- I - I				
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-1		Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
Incident	2										
Incident	3										
											·
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-2	2	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
Incident	2										
Incident	3										
		• •	•	- I - I	· · ·	- F - F	· ·		•	- I	
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-3	5	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
Incident	2										
Incident	3										
		• •	•	- I - I	- I - I	- F - F	· ·		•	- I	
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-4	Ļ	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
	2										
	3										
		1 1		I			I I			I	
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-5	5	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
Incident	1										
Incident	2										
Incident	3										
		· ·		- I I			- I I				
		Incorrect	Underpayement	Improper	Amount (\$\$\$) of	Calculated (\$\$\$)	Liquidated Damages	Restitution	Enforcement Report	DOL/FLCOM	Incident
SUB-CONTRACTOR-6	5	Classification	of Hourly Rate	Overtime	Restitution Owed	Liquidated Damages	Imposed/Waived	Paid Date	Submitted	Response	Closed
	1										
	2										
	3										
-		1		1	1						

Sub-Contractor 1 - Name Sub-Contractor 2 - Name Sub-Contractor 3 - Name Sub-Contractor 4 - Name Sub-Contractor 5 - Name Sub-Contractor 5 - Name

ution	Enforcement Report		DOL/FLCOM	Incident
ate	Submitted		Response	Closed

ution	Enforcement Report	DOL/FLCOM	Incident
ate	Submitted	Response	Closed

ition	Enforcement Report	DOL/FLCOM	Incident
ate	Submitted	Response	Closed

ution	Enforcement Report	DOL/FLCOM	Incident
ate	Submitted	Response	Closed

ution	Enforcement Report	DOL/FLCOM	Incident
ate	Submitted	Response	Closed

ution	Enforcement Report	DOL/FLCOM	Incident
ate	Submitted	Response	Closed