Suggested format of Application to Director for Approval of Awarding Body's Labor Compliance Program (8 CCR §16425)

NOTE: If necessary, you may attach additional sheets.

The Director may ask for additional documentation as to any information provided or any other information that may have a bearing on your ability to do labor compliance enforcement.

Aw	arding Body Seeking Approval:					
		NI				
		Name				
		Address				
Aw	arding Body's Contact Person:					
		Name				
		Address				
	Phone	Fax	E-Mail			
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	who will monitor or supervise the outside work as well as the individuals and affiliations of the individuals who will perform the enforcement work.) 1					
		Title				
	Experience/training on public works/labor compliance issues (Please provide specific dates, details and examples of public works prevailing wage rate enforcement activities, including whether such experience involve federal, state, or local law. In addition, please include private sector experience on behalf of unions or contractors or on a joint labor management committee pursuant to the federal Labor Management Cooperation Act of 1978 (29 U.S.C. section 175a). Furthermore, please include participation in any public works enforcement training provided by the Division of Labor Standards Enforcement (DLSE)):					
	LCP duties and responsibilities to b	ne performed includir	ag percentage of time to be devoted to			

Rev. 1/16/2009 8 CCR §16425

Name		
	Title	
examples of federal, state on a joint I U.S.C. sec	nce/training on public works/labor compliance issues (Please provide specific dates, details as of public works prevailing wage rate enforcement activities, including whether such experience involvente, or local law. In addition, please include private sector experience on behalf of unions or contractors labor management committee pursuant to the federal Labor Management Cooperation Act of 1978 (29 tion 175a). Furthermore, please include participation in any public works enforcement training provide on of Labor Standards Enforcement (DLSE)):	
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	ies and responsibilities to be performed including percentage of time to be devoted to rk:	
LCP dut LCP wor	rk:	

LCP duties and responsibilities to be performed including percentage of time to be devoted to LCP work:

Rev. 1/16/2009 8 CCR §16425

B. State the average number of public work projects the awarding body annually administers:

C. State whether the proposed LCP is a joint or cooperative venture among awarding bodie so, how the resources and expanded responsibilities of the LCP compare to the awarding involved:			
D.	Describe the awarding body's record of taking cognizance of Labor Code violations in the preceding five years, including any withholding of funds from public works contractors pursuant to LC 1726.		
E.	Identify the attorney or law firm available to provide legal support for the LCP, including handling of the LCP's responsibilities during the administrative review process set forth in Labor Code Section 1771.6.		
	Attorney/Law Firm Name		
	Address		
	Contact Person & Phone Number		
F.	Identify the method by which the LCP will notify the Labor Commissioner of willful violations as defined in Labor Code Section 1777.1(d):		
G.	Indicate whether the Awarding Body has established its own Labor Compliance Program in accordance with the requirements of Labor Code Section 1771.5(b) and subchapter 4 of chapter 8 of Title 8 of California Code of Regulations or has contracted with a third party that he been approved by the Director to operate a Labor Compliance Program in accordance with the requirements of Labor Code Section 1771.5(b) and subchapter 4 of chapter 8 of Title 8 of California Code of Regulations. If the Awarding Body has contracted with one or more persons or entities to operate all or any part of the Awarding Body's Labor Compliance Program, please identify (name, address, telephone, and principal contact) all of those persons or entities.		

Rev. 1/16/2009 8 CCR §16425

	gested format of Application to Director for Approval of A CR §16425)	Awarding Body's Labor Compliance Program Page 4 of 4
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Н.	the Awarding Body to have an LCP as a condition	are funded by bonds or other statutes that require on of funding). If not, please indicate the kinds of compliance and whether you are required to have a
	labor compliance program as a condition for ob-	taining funding for the project of projects.
I.	Attach a copy of the Awarding Body's resolution resolution approving any contracts with persons	
J.	Attach the proposed manual outlining the respo	nsibilities and procedures of the LCP.
3		•
	Association Doder's Domingontative	Data Signad
	Awarding Body's Representative Name and Signature	Date Signed
Ma	il two copies of this form and attachments to	:
	OFFICE OF THE DIRECTOR	
	DEPARTMENT OF INDUSTRIAL RE	CLATIONS

OAKLAND, CA 94612

ATTENTION: EXECUTIVE ASSISTANT TO THE DIRECTOR