PROOF OF OWNERSHIP MASTER FORM

COMPLETE and RETURN with copies of ETA Forms 9142 and 790 to:

Director, Bureau of Labor Standards 45 State House Station Augusta, ME 04333-0045

Name of Employer:	
Unemployment Insurance Account Number:	
Name of the company owner(s), President, or CEC):
If Corporation, please provide name of Clerk of Co	orporation:
Address of main office:	
Contact Person if other than owner:	
Telephone #:	
Number of bond (H2A) workers requested:	
Complete and attach Equipment List pages as needed by a bonded worker hired by you under the H2A parall equipment listed!)	
additional documents are true and accurate. I under will be a violation under the authorizing statute subje	formation provided on this form and any attached forms and stand that the failure to provide full and accurate disclosure ect to a fine of \$5,000 to \$25,000 as well as exclusion from nd that false statement may also be prosecuted as an to one year in jail and \$2,000 in fines.
Signature:	Date:
Title:	

PROOF OF OWNERSHIP MECHANICAL EQUIPMENT LIST

Provide description and serial number of all equipment **owned** by applicant that may be used by a bonded worker hired under the H2A program.

Serial Number
FB000123

Attach receipts for purchase of all equipment listed above and documentation of tax payments made.

PROOF OF Bona Fide LEASE MECHANICAL EQUIPMENT LIST

Provide description and serial number of all equipment **leased** by applicant that may be used by a bonded worker hired under the H2A program.

3 CMR Enterprises

Attach required documentation for all equipment listed above, including:

- A copy of each lease document, including specific duration and lease amount.
- Address and telephone number of each lessor.
- Affiliates and subsidiaries of each lessor.
- Names, addresses and telephone numbers of each lessor's owner(s), agent(s) and directors.
- Name(s) of bond worker(s) or family members of bond worker(s) or other individual(s) related to bond worker(s) by blood or marriage, who own or control the lessor, if any.
- Copies of leases by the lessor of logging equipment to at least three different, unrelated entities within each of the past three years.

PROOF OF OWNERSHIP BONDED (H2A) WORKER — Equipment Usage Form

Name of Worker:	
Country of Origin:	
Date admitted into USA:	
Occupation:	Location of work (county):
Employment start date:	Expected end date:
Description and serial number	of the equipment this worker will operate:
Description	Serial Number
File one form for each bond worker within 30 days of start date, and attach a copy (both sides) of the worker's DHS-CBP I-94 Entry & Departure Record.	
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	Maine Department of Labor Bureau of Labor Standards
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