**Request for Wage Determination**

In accordance with 26 MRSA §1301 et. seq., a request for a determination of the fair minimum wage rate to be paid laborers, workers, and mechanics on the project described below is hereby made.

(Print or type only; when typing hit Tab key to go from form field to form field.)

1. Project Title:
2. Description of Project:
3. Location of Project: (Civil Division/City and County)       /
4. Check All Types of construction to be performed on this project, and indicate the estimated cost for each type.

 (Click on box or hit space bar to check and uncheck boxes.)

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  **Building 1** (1 or 2 family homes) | [ ]  **Building 2** (Other than 1 or 2 family homes) | [ ]  **Highway & Earthwork** | [ ]  **Heavy & Bridge** |
| $      |  | $      |  | $      |  | $      |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Proposed Advertising Date:
 |       | Contract Signing Date: |       |
| 1. Today’s Date:
 |       |  |  |
| Project Manager/Phone Number: |       |
| Signature of Requesting Officer: |       |
| Name (Typed or Printed):  |       |
| Title of Requesting Officer:  |       |
| Requesting Officer’s Telephone Number: |       |
| Requesting Agency: |       |
| Mailing Address: |       |
| **A determination will be issued for each type of construction performed on this project.**Do not request a determination for contracts that will amount to less than $50,000.  |
| **BLS use only** |
| Determination Issued by: |       |  | Mailing Date: |       |
| Determination Number: |       |  |  |
| *The Maine Department of Labor provides equal opportunity in employment and programs. Auxiliary aids and services are available to individuals with disabilities upon request.* |

 BLS424 (Rev. 12/18)