## PREVAILING WAGE NOTIFICATION to EMPLOYEE

4115.05...the contractor or subcontractor shall furnish each employee NOT covered by a collective bargaining agreement written notification of the job classification to which the employee is assigned, the prevailing wage determined to be applicable to that classification, separated into the hourly rate of pay and the fringe payments, and the identity of the prevailing wage coordinator appointed by the public authority. The contractor or subcontractor shall furnish the same notification to each affected employee every time the job classification of the employee is changed.

Project Name:					Job Num	Job Number:	
Contractor:							
Project Location:							
Prevailing Wage Coordinator			Employee				
Public Authority:			Name:				
Name of PWC:			Street:				
Street:	City:						
City:			State/Zip:				
State/Zip:			Phone:				
			Email:				
Phone:	Last 4 Digits of SS #:						
You will be performing work on this pro- type of work you are performing.	ect that falls	under these	e classifications.	You will be	paid the app	ropriate rate for the	
Classification:		Prevailing Wage Rate Total Package:		Minus your fringe benefits *:		Your hourly base rate and overtime:	
						/	
						/	
						/	
						/	
						/	
						/	
Hourly fringe benefits paid on your beha	alf by this con	npany (Yea	rly amount the co	mpany pa	<b>ys</b> divided by	/ 2080):	
Fringe	Amount		Fringe		Amount		
Health Insurance			Vacation				
Life Insurance			Holiday				
Pension			Sick Pay				
Other (Specify)		Training					
Other (Specify)			Total Hourly Fringes *				
Contractor's Signature:						Date:	
Employee's Signature:						Date:	