

OFFICE OF THE CITY ADMINISTRATOR

OFFICE OF LABOR STANDARDS ENFORCEMENT

PATRICK MULLIGAN, DIRECTOR



Covered Contractor Certification Form
Residential Construction Wage Theft Prevention Ordinance

The undersigned certifies that they complied with all state and local labor laws on the Project and permit number below.

GENERAL PROJECT INFORMATION	
Project Address or Project Name:	
Department of Building Inspection Permit Number:	
Date Department of Building Inspection Issued Permit:	
Total \$ Value of Permit:	
Final Certificate of Completion or Occupancy Number and date:	
Name of Project Owner:	

CONTRACTOR INFORMATION	
Company Name:	
Contact Name & Title:	
Address:	
Phone:	
Email:	
California State Contractor License Registration Number:	
Start Date on project:	
Value of the Contractor's Scope of Work and percentage of Total Value:	

This certification is submitted as part of the requirement to release the Bond on the project named above and must be submitted prior to requesting release of the Bond. If a Covered Contractor did not submit the Acknowledgment Form or certifications upon starting work, please submit them to the email below.

The undersigned Covered Contractor certifies that they complied with all applicable State and local labor protections including but not limited to employee notice and payroll recordkeeping requirements under California Labor Code Sections 226 and 2810.5 and San Francisco Labor and Employment Code Articles (L.E.C. Art.) 1.5(c), 11.6, and 21.3(f), and to provide the Agency with access to such records under San Francisco L.E.C. Art. 1, 11, 21 and other applicable laws if requested. This acknowledgement is submitted as required under San Francisco L.E.C. Art. 81.4. **If OLSE requests any missing Contractor documentation, failure to submit documents within 14 calendar days of the request could result in the City retaining the Bond posted on this project in the amount of not less than 25% of the value of each Contractor's scope of work that is missing a required document, plus any bond value required to be maintained under L.E.C. Article 81.5(d)(3)(B) and (d)(3)(C).**

Name

Signature

Date

Submit a signed scan of this form via email to OLSE.LaborBond@sfgov.org.