

Public reporting burden for this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

All Federal agencies administering programs subject to Davis-Bacon wage provisions are required to enforce Federal wage and reporting provisions in an accordance with the U.S. Department of Labor (DOL) regulations at 29 CFR Part 5, Section 5.6 paragraphs (a)(1), (2) and (3). This information is being collected to assess compliance with Federal labor standards provisions. This information collection will assist the U.S. Department of Housing and Urban Development (HUD) to determine if an agency is in compliance with Federal labor standards wage and reporting requirements on covered HUD-assisted construction and maintenance work pursuant to the Davis-Bacon Act and HUD Davis-Bacon Related Acts. Participation in this collection is required. Failure to provide this information may result in a monitoring finding and sanctions may be imposed in accordance with 29 CFR Section 5. 6. No assurances of confidentiality are provided.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, OMAC, US. Department of Housing and Urban Development, 451 7th Street SW, Washington, DC 20410. When providing comments, please refer to OMB Approval No. 2501-0043.

Part A. Agency Labor Standards Administration

1. Agency Information

a. Agency name [Redacted]	b. Agency Address [Redacted]	c. Agency No. (DBLS Use) [Redacted]
d. Chief Executive Officer/Director [Redacted]	e. Agency Labor Standards Officer (LSO) [Redacted]	f. Agency Telephone No. [Redacted]

2. Agency Labor Standards Officer (LSO) / Staff **Yes No NA**

a. Agency staff includes an LSO or key staff person with primary responsibility for labor compliance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. LSO is informed of all proposed projects funded/assisted with HUD funds?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. LSO approval required prior to advertisement of contracts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. LSO approval required on all payments to contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. LSO examines subrecipient/subgrantee/subcontract management firm contract activity as necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Federal Labor Standards Monitoring Review Process **Yes No NA**

a. Procedure established to verify inclusion of correct wage decision & labor standards provisions in contracts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Procedure established to verify/document contractor eligibility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Payrolls/documents are examined regularly to assess Federal labor standards compliance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Procedure established to conduct/target employee interviews?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Wage Decision Issuance Process **Yes No NA**

a. Maintains a system to ensure that applicable wage decisions are obtained/applied timely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Maintains system to verify wage decision "lock-in"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Other Requirements – Reports, Escrows

Yes No NA

- a. Make reports using HUD Form 4710 for CWHSSA liquidated damages?
- b. Submits Labor Standards Enforcement Reports (HUD Form 4710), timely and complete?
- c. Total amount of funds escrowed for HUD/DBRA/CWHSSA violations: \$

- End of Part A -

Part B. Agency Labor Standards Contract Compliance – Davis-Bacon Covered Projects

1. Contract Identification

a. Agency Name <input type="text"/>		b. Grant No. & Type (Funding Source) <input type="text"/>	
c. Project Name <input type="text"/>		d. Project Identifier (Agency's contract number, etc.) <input type="text"/>	
e. Location of Project <input type="text"/>		f. Prime Contractor <input type="text"/>	
g. Description (Scope) of Work – Include number of units & stories for housing projects <input type="text"/>			h. Contract Amount \$ <input type="text"/>
i. Labor Standards Provisions (HUD Form No. Used) <input type="text"/>	j. Wage Decision No. Used – Include Modification No. <input type="text"/>	k. Bid Opening Date <input type="text"/>	
l. Contract Award Date <input type="text"/>	m. Construction Start Date <input type="text"/>	n. % Complete or Completion Date <input type="text"/>	

2. Contract Documents

Yes No NA

- a. Labor standards provisions incorporated in contract?
- b. Wage decision incorporated in contract?
- c. Is prime contractor eligibility verification on file?

3. Weekly Payrolls

Yes No NA

- a. Did the agency obtain all payrolls (first to current/last) for each contractor on the job?
- b. All contractors / trades represented by payrolls received?
- c. Payroll data consistent of periodic inspections & employee interviews?
- d. Payroll certification statements signed by employer or authorized representative?
- e. Apprentices or trainees reported on payrolls?
- f. Apprentice/trainee certification obtained?
- g. Contractors in compliance with apprentice/trainee ratio requirements?
- h. Do payrolls report generic job classifications (e.g., "mechanic," "operator," "installer," "journeyman") not on wage decision? If yes, please explain the circumstances and action taken, if any.
- i. Do payrolls report job classifications for which an "Additional Classification" request was necessary?
- j. Did the agency obtain DOL/HUD approval to add classifications to the wage decision?
- k. Did the agency review to ensure that the correct wages were paid in accordance with the wage decision?

Provide explanatory information for each "No" response, as needed; NA = Not Applicable

Part B, Continued

3. Weekly Payrolls, Continued

Yes No NA

- l. Where reported, were payroll deductions permissible per DOL regulations? Yes No NA
- m. If reported, were fringe benefits acceptable per DOL regulations? Did the agency spot-check the Statements of Compliance to verify the appropriate box for fringe benefit payments (4a or 4b) has been checked? Yes No NA
- n. Was the Contract Work Hours and Safety Standards Act (CWHSSA) threshold met? (overtime) Yes No NA
- o. Has any laborer or mechanic worked over 40 hours per week on this project? Yes No NA
- p. If yes to (n) and (o), has overtime (1.5 times the regular rate of pay) been paid for hours worked over 40/wk? Yes No NA
- q. If answer to (n) is yes and (p) is no, was the employer notified to pay restitution & were liquidated damages computed/recommended? Yes No NA

4. Employee Interviews

Yes No NA

- a. Were employee interviews completed? Yes No NA
- b. Did the agency target interviews? Yes No NA
- c. Did interviews record work performed by worker and observed by the interviewer? Yes No NA
- d. Were interviews compared to payrolls? Yes No NA
- e. Send to DBLS copies of interviews completed for this project. Copies attached Yes No NA
- f. Did the agency send mail-out questionnaires to employees if needed? Yes No NA
- g. Did the agency follow up on leads developed from interviews/questionnaires? Yes No NA

5. Contract Administration

Yes No NA

- a. Were any complaints received on this contract? Yes No NA
- b. Were violations (misclassification, underpayment, etc.) corrected? Yes No NA
- c. Were violations reported to HUD? Yes No NA

- End of Part B -

Part C. Agency Contract Labor Standards Compliance – HUD-Determined Wage Rates for Routine and Non-routine Maintenance Contracts

1. Contract Identification

a. Agency Name [REDACTED]		
b. Project Name [REDACTED]	c. Project Identifier (Agency's Contract Number, etc.) [REDACTED]	
d. Location of Project [REDACTED]	e. Prime Contractor [REDACTED]	
f. Description (Scope) of Work [REDACTED]	g. Contract Amount [REDACTED]	
h. Wage Decision Used – Include Effective Date and Routine or Non-Routine [REDACTED]	i. Labor Standards Provisions Used (HUD form used, if applicable) [REDACTED]	j. Bid Opening Date [REDACTED]
k. Contract Award Date [REDACTED]	l. Work Start Date [REDACTED]	m. % Complete, or Completion Date [REDACTED]

2. Contract Documents

Yes No NA

a. Labor standards requirements incorporated in contract, purchase order, or similar agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Wage decision incorporated in contract, purchase order, or similar agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Wage Payment

Yes No NA

a. Has the agency established a method to ensure workers are paid not less than the rate determined by HUD? Describe methodology on separate sheet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does work require classifications not included on the applicable HUD wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. If yes to (b), did the agency obtain HUD approval to add classifications to the applicable wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Were the correct wages paid in accordance with the applicable wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Has the agency established a method to ensure laborers or mechanics working over 40 hours per week on this project have been paid overtime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Was the Contract Work Hours and Safety Standards Act (CWHSSA) threshold met? (prime contract exceeds \$100,000)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Has any laborer or mechanic worked over 40 hours per week on this project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. If yes to (f) and (g), has overtime (1.5 x the regular rate of pay) been paid for hours worked over 40/wk?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. If answer to (f) is yes and (h) is no, was the employer notified to pay restitution & were liquated damages computed/recommended?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part C., Continued

4. Employee Interviews

Yes No NA

- | | | | |
|--------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| a. Were employee interviews completed? | <input type="checkbox"/> | <input type="checkbox"/> | |
| b. Did the agency target interviews? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Did interviews record <u>work</u> actually performed by the worker and observed by the interviewer? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Were interviews compared to the HUD-determined rate schedule? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. <u>Send</u> to DBLS copies of interviews completed for this project. | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Did the agency conduct mail-out questionnaires if needed? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Did the agency follow up on leads developed from interviews/questionnaires? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Copies attached

5. Contract Administration

Yes No NA

- | | | | |
|-----------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| a. Were any complaints received on this contract? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Were violations (misclassification, underpayment, etc.) corrected? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- End of Part C -

Part D. Agency Maintenance Wage Rate Administration

Agency Name:

1. Maintenance Wage Enforcement

Yes No NA

- | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| a. Please submit a copy of the maintenance staffing portion of the current operating budget. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Identify, on a separate sheet, all maintenance laborers and mechanics employed by the agency. Please provide employee name, classification, base hourly wage rate. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Is part of the base hourly wage rate offset by allowances or fringe benefits? If yes, explain on a separate sheet. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Is part of the required fringe benefits offset by other allowances or cash payments? If yes, explain on a separate sheet. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Does the agency have position descriptions that accurately describe the work performed by maintenance staff? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Has the agency submitted to HUD copies of current position descriptions for maintenance laborers and mechanics? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Effective date of current maintenance wage decision (HUD-52158) on file: | <input type="text"/> | | <input type="checkbox"/> |
| h. Please submit copies of recently completed work orders for each maintenance employee.
> If a written form is not used, submit a description of the system used for recording maintenance assignments, the type of work performed, and by whom. | | | <input type="checkbox"/> |
| i. Are employees working within assigned classifications? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Are employees properly compensated for hours worked over 40 per week? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Has the agency issued contracts or purchase orders for routine or emergency maintenance work?
> If the answer to (k) is "yes" please complete a separate Part C for HUD Determined Wage Rates for each contract or purchase order work selected for review. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. Training, Apprenticeship, & Special Employment Programs

Yes No NA

- | | | | |
|----------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| a. Does the agency participate in an apprenticeship program for maintenance employees? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Has the agency obtained HUD approval for maintenance apprenticeship programs? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Does agency participate in job/skill training for agency residents or other low-income persons? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Does the agency employ youth in maintenance at any time during the year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Are youth compensated at less than prevailing rates? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- End of Part D -

Part E. Agency Labor Standards Compliance – Force Account Work

This review guide, Part E for Force Account work, is for work performed by the regular employees hired specifically for a project or work item of a PHA, IHA, TDHE or DHHL maintenance employees and/or mechanics. Depending on the type of work, HUD Determined or Davis-Bacon wage rates could apply to the work.

1. Project Identification

n. Agency Name []	o. Activity Type (development or operations) / Grant No. (if any) []
p. Project Name []	q. Project Identifier / Work Item Number []
r. Location of Project []	s. Description of Work (include number of stories for housing projects) []
t. HUD Maintenance Wage Rate Decision – Include Effective Date or Davis-Bacon Wage Decision- Include Modification Number []	u. Budgeted Cost (Labor & Materials) []
v. Work Start Date []	w. % Complete, or Completion Date []

2. Enforcement – General

	Yes	No	NA
a. Has the agency established a method to ensure force account workers are paid not less than the rate required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Did the agency maintain work records for employees showing employee name, address, Social Security Number?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Did the agency maintain weekly work records showing daily hours worked, classification (trade), pay rate & deductions for each worker?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Were apprentices or trainees employed on the project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Was the apprentice/trainee program approved? (if no apprentices, answer 'NA')	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Were apprentices/trainee ratio requirements met? (if no apprentices, answer 'NA')	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Did the applicable wage decision include all classifications needed for completion of the project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. If no to (g), did the agency obtain approval from/through HUD DBLS to add classifications to the wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Project Administration

	Yes	No	NA
a. Procedure established to track complaint resolution?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Were any complaints received from workers or others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Were violations (misclassification, underpayment, etc.) corrected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- End of Part E -

Part X. Exit Conference

a. Agency Name [Redacted]	b. Agency ID No. [Redacted]
c. Conference Method [Redacted]	d. Conference Date and Time [Redacted]
e. Conference Attendees/Participants - Name, Organization, and Title (attach list to this form if more room needed) [Redacted]	
f. Reviewer(s) - Name and Title [Redacted]	

Agency representatives were advised of problem areas, and were provided an opportunity to question and discuss the basis for preliminary conclusions. The following principal areas were discussed; additional items are covered on a separate page and attached to this form.

<input type="checkbox"/>	Staffing Knowledge, capacity, sufficient number for volume of work. Is the work that is being done effective? Is there a disproportionate amount of covered activity not being reviewed?
<input type="checkbox"/>	Information Systems / Tracking Mechanisms Note: Agencies have very wide latitude in the configuration, locations, and functioning of the system.
<input type="checkbox"/>	Enforcement Files / Records Note: Agencies have very wide latitude in the configuration, locations, and functioning of the system. The focus in this section is that complete records for covered activities are maintained for the duration required and that they be retrievable in a reasonable time. As with management system, "blind spots" can be brought to the attention of the agency. Reviewers are cautioned about requiring revisions in the absence of violations resulting from a flawed system.
<input type="checkbox"/>	Labor Standards Review – Procedures Agency processes to review funded/assisted projects for applicability of labor standards ensure appropriate wage decisions/determinations and labor standards provisions are included in agreements/orders for covered work and that project records are established and managed with the knowledge of appropriate officials and offices of the agency.

Part X., continued

<input type="checkbox"/>	<p>Labor Standards Review – Effectiveness Outcome of the agency’s systems and efficiency, including actions of grantee agencies and management firms.</p>
<input type="checkbox"/>	<p>Technical Assistance and Training Quality and effectiveness of the technical assistance and training provided by the agency to its grantees, contractors, and management firms. Also covers the technical assistance and training needs of the agency’s staff.</p>
<input type="checkbox"/>	<p>Wage Decision Issuances The agency’s application of wage decisions/determinations, including applying for changes.</p>
<input type="checkbox"/>	<p>Complaints Actual complaints received or procedures established/needed.</p>
<input type="checkbox"/>	<p>Restitution and Escrow Administration Conclusions concerning the “perfection” of restitution. Were certified payroll reports submitted for the restitution payments, as well as an assurance of future compliance? Were sufficient funds retained when needed? Were funds handled appropriately? Does the agency have appropriate documentation on the circumstances requiring escrows?</p>
<input type="checkbox"/>	<p>Reporting Requirements (Semi-Annual Reports, Enforcement Reports) Conclusions about the validation of the reports were sent to HUD/DOL.</p>
<input type="checkbox"/>	<p>Other (summarize below or provide details on separate sheet and attach to this form) <div style="background-color: #cccccc; height: 100px; width: 100%;"></div> </p>
<input type="checkbox"/>	<p>Preliminary Conclusions <div style="background-color: #cccccc; height: 100px; width: 100%;"></div> </p>

Part X., continued

<input type="checkbox"/>	Areas of Disagreements, if any [Redacted]
<input type="checkbox"/>	Required follow-up actions by LCA or Reviewers, if any [Redacted]
<input type="checkbox"/>	Additional Comments [Redacted]

- End of Form -