

**B-5: VERIFICATION OF WAGE DECISION(S) AND CONTRACTOR ELIGIBILITY**

<b>Verification of Wage Decision(s) &amp; Contractor Eligibility</b>		
<b>Please Note:</b> Verifications must be obtained prior to award of contract		
1.	Grantee Name	
2.	LCDBG Contract Number	
3.	Parish	
4.	Bid Opening Date	
5.	Description of work covered by the bid package	
<ul style="list-style-type: none"> <li>• Identification of wage decision(s) made part of the bid package whether by initial inclusion in bid document or by addendum. Example: LA 08 0014, Mod 0, 2/8/08</li> </ul>		
6.	Decision Number(s)	
7.	Modification Number(s)	
8.	Issue Date(s)	
<ul style="list-style-type: none"> <li>• Identification of the prime contractor and principals of the firm.</li> </ul>		
9.	Prime Contractor Name	
10.	Address	
11.	City	
12.	State	
13.	Zip Code	
14.	Contractor Phone Number	
15.	Enter the name of each principal below	Enter the title of each principal
16.		
17.		
18.		
19.	Grantee's Labor Compliance Officer (Signature or name)	
20.	Upon verification send this form to fax number	
21.	Date of this request	
<ul style="list-style-type: none"> <li>• State Use Only: Initials &amp; dates below indicate verification by OCD</li> </ul>		
22.	Wage decision(s) above verified by (Signature, date) (Valid only if awarded within 90 days of bid opening)	
23.	Prime contractor's eligibility verified (Signature, date)	
24.	Verification by fax is hereby sent to (Name of Person)	