

CONTRACT FEE SECTION PREVAILING WAGE RATE UNIT BUREAU OF LABOR AND INDUSTRIES 800 N.E. OREGON ST., #1045

PORTLAND, OR 97232-2180 PHONE: (971) 673-0852 FAX: (971) 673-0769

For Office Us	e Only:
Project DB #:	

PUBLIC WORKS FEE ADJUSTMENT FORM

THIS FORM TO BE USED FOR RECONCILIATION OF FEES UPON COMPLETION OF PUBLIC WORKS PROJECTS

(As required by ORS 279C.825 and OAR 839-025-0210)

PUBLIC AGENCIES: Complete and mail this form to BOLI at the above address after completion of the public work project and not less than 30 days after the final progress payment is made to the contractor. Public agencies are required to determine the final contract price, including all change orders or other adjustments to the original contract price, and to calculate the adjusted prevailing wage rate fee based on the revised contract price. Documentation must be included to support the final contract price. Documentation of the final contract price may consist of change orders or other contract documents substantiating the amount of the contract. The prevailing wage rate fee of one-tenth of one percent (.001) shall be applied to the final contract price, with credit taken for fees already submitted. The public agency must submit any additional fee payable to BOLI, or submit any request for refund, with this adjustment form. NO ADDITIONAL FEE IS REQUIRED TO BE PAID, AND REFUNDS WILL NOT BE MADE, FOR RECONCILED AMOUNTS OF LESS THAN \$100.00.

PUBLIC AGENCY:				AGENCY #:		
AGENCY CONTACT PERSON:				PHONE:()	
MAILING A	DDRESS:					
	[AME:					
CONTRACT	NAME (if part of larger	project):				
PROJECT N	UMBER:	_ PROJECT L	OCATION:			
CONTRACT	OR/BUSINESS NAME (I	OBA):				
CONTRACTOR CCB#: DATE						
FINAL CONTRACT/PROJECT AMOUNT: (Include all change orders and adjustments to the contract price) .001)			FINA			
ORIGINAL CONTRACT AMOUNT:				INITIAL FEE PAID:(Original Contract amount X .001)		
TOTAL ADJ	IUSTMENT:		BALA	NCE DUE*:		
				or IND DUE*: Sinal contract fee l		
	Sample Calculation:					
	Final Contract Amount: Original Contract Amount: Total Adjustment:	- 300,000.00		<u>- 300.00</u>		

(Please duplicate this form for future use)