**Public Works Prevailing Wage Certification**

|  |  |  |  |
| --- | --- | --- | --- |
| Project: |  | | |
| PW#: |  | Contractor Name: |  |

I certify that the prevailing wages have been paid in accordance with the pre-filed Statement(s) of Intent to Pay Prevailing Wages on file with the Contracting Services Division of Finance and Administrative Services. This statement covers the following period:

|  |  |  |
| --- | --- | --- |
|  | to |  |
| month/day/year |  | month/day/year |

The following subcontractors and suppliers performed work on this project during this payment period:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Subcontractor or Supplier?** | **UBI #** | **Intent ID #** | **Affidavit ID #** |
|  | Sub Supplier |  |  |  |
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|  | Sub Supplier |  |  |  |
|  | Sub Supplier |  |  |  |

This letter shall be signed by an authorized representative of the Contractor prior to payment pursuant to RCW 39.12.040.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contractor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date