Attachment C



POST-CONSTRUCTION Affidavit for Construction Workforce

Department of Workplace and Employment Standards (DWES) 250 Frank H. Ogawa Plaza, Suite 3341 Oakland, CA 94612

Required for all newly constructed buildings having at least one hundred (100) residential dwelling units or one hundred thousand (100,000) square feet of new non-residential floor area.

Submit Within Six Months of Construction Completion (OMC 15.80.030 C.D.)

Name:				
Email:	Telephone:			
Address:				
2. Property Information and Rela	ted Applications			
Project Address:				
Block/Lot(s):				
Building Permit Application No(s):				
Number of Residential Units:	Number of SQ FT Commercial Space:			
Height / Number of Floors:	Total Construction Cost:			
Construction Completion Date:				
3. Construction Workforce Inform	nation			
	YES NO			
A. Were employee wages consistent with are	a Prevailing Wage?			
B. Did the awarded contractor(s) participate State of California's Department of Indus	in an apprenticeship program approved by the strial Relations?			
C. Were workers provided employer-sponsore	d health care benefits?			
D. Did workers need to provide their own tool	ls to work on the project?			
b. Did Workers field to provide their own took				

4. Construction Workforce Projections

Please provide the number of employees from each construction trade that were used on the project, and indicate how many were entry and/or apprentice level as well as the journeyman wages paid for these positions.

TRADE/CRAFT	JOURNEYMAN WAGE	# APPRENTICE POSITIONS	#TOTAL POSITIONS	TRADE/CRAFT	JOURNEYMAN WAGE	# APPRENTICE POSITIONS	# TOTAL POSITIONS
Abatement Laborer				Painter			
Boilermaker				Pile Driver			
Bricklayer				Plasterer			
Carpenter				Plumber and Pipefitter			
Cement Mason				Roofer/ Waterproofer			
Drywaller/ Latherer				Sheet Metal Worker			
Electrician				Sprinkler Fitter			
Elevator Constructor				Taper			
Floor Coverer				Tile Layer/ Finisher			
Glazier				Other:			
Heat & Frost Insulator							
Ironworker				Other:			
Laborer							
Operating Engineer	(Other:			
		TOTAL:				TOTAL:	

5. Construction Contractors

Please provide the name, scope of work, address, and contract value for all the construction contractors that were used on this project:

NAME OF CONTRACTOR	SCOPE OF WORK	ADDRESS	FINAL CONTRACT VALUE

5. Construction Contractors (continued)

Please provide the name, scope of work, address, and contract value for all the construction contractors that were used on this project:

NAME OF CONTRACTOR	SCOPE OF WORK	ADDRESS	FINAL CONTRACT VALUE

DECLARATION OF SPONSOR OF PRINCIPAL PROJECT

NAME	EMAIL	PHONE NUMBER		
T HEDERY DECLARE LINDER DEN	ALTY OF PERJURY THAT THE INFORMA	TION DROVIDED HEREIN IS		
		HOM FROVIDED HEREIN 13		
ACCURATE TO THE BEST OF MY KNOWLEDGE.				
(CICALATURE OF AUTHORIZED REPRECENTATIVE)		(DATE)		
(SIGNATURE OF AUTHORIZED REPRESENTATIVE)		(DATE)		
PLEASE EMAIL AN ELECTRONIC COPY OF THIS COMPLETED POST-CONSTRUCTION WORKFORCE AFFIDAVIT WITHIN SIX				
MONTHS OF CONSTRUCTION COMPLETION TO THE DEPARTMENT OF WORKPLACE AND EMPLOYMENT STANDARDS				
(DWES) AT DWES@OAKLANDCA.GOV.				
oaklandca.gov/departments/workplace-employment-standards				
Odkidilu	ca.80v/departments/workplace-employment-standards			