

# Construction Careers Pathway Program-- High Road Contractor Information

Please see Regional Workforce Equity Agreement (RWEA) for complete High Road Contractor requirements

<b>CONTRACTOR INFORMATION</b> (to be completed by prime and subcontractors)		
Your company name:	CCB#	
Are you a first-tier contractor?      Yes      No	If yes, will you be hiring subcontractors:      Yes      No	
Will you make subcontractors aware of RWEA and the requirement to complete this attachment?		Yes      No
List subcontractors to be used. Provide attachment, as necessary:		
<b>SUBCONTRACTOR INFORMATION</b> (to be completed <i>only</i> by subcontractors)		
Identify first tier contractor:		
Have you received a copy and reviewed the Regional Workforce Equity Agreement (RWEA)?		Yes      No
<b>Estimated Start Date:</b>		
<b>VIOLATIONS</b>		
Have you had any final determination by BOLI of a willful violation within the last three (3) years?*		Yes      No
Have you had any final determinations of an OSHA violation within the last three (3) years?*		Yes      No
<b>HEALTH COVERAGE</b>		
Do you provide employee health coverage?      Yes      No ; If yes, provide policy information below:		
Insurance Company:	Policy #:	
<b>If no, please provide name of 3<sup>rd</sup> party administrator or explanation:</b>		
Does health plan offer an option for employee to enroll in full family health coverage?		Yes      No
<b>APPRENTICESHIP</b>		
Will you perform at least \$100,000 of work <u>and</u> over 300 work hours?		Yes      No
Which trades do you anticipate utilizing?		
Are you registered as a training agent for all crafts covered at the time of this bid submittal:		Yes      No
If yes, please provide a copy of your BOLI Trade Agreement # below		
Trade: <b>Estimated Hours</b>	Trade: <b>Estimated Hours</b>	Trade: <b>Estimated Hours</b>
Journey:	Journey:	Journey:
Apprentice:	Apprentice:	Apprentice:
BOLI Trade Agreement #:	BOLI Trade Agreement #:	BOLI Trade Agreement #:
<b>*COMMENTS</b> Add any additional comments below		
<b>CERTIFICATION</b> I hereby certify that the aforementioned information is true and correct		
Print Name:	Signature:	Date: