

Division of Community Services – Compliance Bureau Post Office Box 849 Jackson, Mississippi 39205 Phone: (601) 359-3179 Fax: (601) 359-3108	REQUEST FOR WAGE DETERMINATION AND RESPONSE TO REQUEST			(Davis-Bacon Act as Amended and Related Statutes)
	Requesting Officer (type name & Signature)			
For Community Services Division - Compliance Use Only Response to Request Type of Work Bldg. <input type="checkbox"/> Highway <input type="checkbox"/> Resid <input type="checkbox"/> Heavy <input type="checkbox"/>	Agency		Phone Number	Project Number:
	Date of Request	Estimated Advertising Date	Est. Bid Opening Date	Project Name:
	Est. Construction Start Date	Est. \$ Value of Contract	Est. Contract Award Date	If Housing Units No. of Stories
Federal Register Decision No.	Location of Project (City or other description)			No. of Dwelling Units
Federal Register Date	County		State Mississippi	Wage Determination under the Davis-Bacon and Related Acts (This Decision is effective from date of publication in the Federal Register without limitation as to time). Note: The Decision should not be used for this project without contacting the office and requesting any current modification or supersedeas decision
Prior Supersedeas Decision	Address to which wage determination should be mailed. Must be complete and include ZIP CODE (Print or Type) Send copy of Wage Decision To: (Architect, Contractor, Etc.)			
Approving Representative, Signature and Title <hr/>				

Ray Robinson, Jr.
Compliance Bureau Manager

DO NOT REMOVE THIS SHEET
FROM DECISION - EACH MUST
BOUND INTO SPECIFICATIONS

Full Complete Description of Work (Be Specific-Print or Type)

Revised 2