



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 Use Only:

Project DB #: \_\_\_\_\_

**PUBLIC WORKS FEE INFORMATION FORM**

For use by public agencies that have contracted with a contractor on a public works project regulated by ORS 279C.800 to 279C.870, in compliance with ORS 279C.825. Also for use by public agencies that are a party to a public works project pursuant to ORS 279C.800(6)(a)(B) or (C).

**PUBLIC AGENCIES:** Please complete and mail this form to BOLI at the above address, along with the public works fee of one-tenth of one percent of the contract price (contract amount x .001), payable to BOLI. **The minimum fee is \$250.00; the maximum fee is \$7,500.00.** Without the following completed information, the bureau may be unable to properly credit you for payment received.

**PUBLIC AGENCY:** \_\_\_\_\_ **AGENCY #:** \_\_\_\_\_

**AGENCY MAILING ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**AGENCY CONTACT PERSON:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_

**PROJECT MANAGER NAME:** \_\_\_\_\_ **PHONE:** (\_\_\_\_) \_\_\_\_\_

**PROJECT NAME:** \_\_\_\_\_

**CONTRACT NAME (if part of larger project):** \_\_\_\_\_

**PROJECT LOCATION:** \_\_\_\_\_

**PROJECT NO:** \_\_\_\_\_ **DATE CONTRACT FIRST ADVERTISED:** \_\_\_\_\_

**DATE CONTRACT AWARDED:** \_\_\_\_\_ **CONTRACTOR CCB#:** \_\_\_\_\_

**CONTRACTOR BUSINESS NAME (DBA):** \_\_\_\_\_

**CONTRACTOR ADDRESS:** \_\_\_\_\_

**CITY, STATE ZIP** \_\_\_\_\_

**CONTRACT AMOUNT:** \$ \_\_\_\_\_ **FEE AMOUNT DUE/PAID:** \$ \_\_\_\_\_

If less than \$50K, is it part of a larger project?  yes  no **Contract amount x .001 = fee due**

(Please duplicate this form for future use.)