

# Caltrans Labor Compliance Program Wage Case Checklist

Contract Number: \_\_\_\_\_ District LCO: \_\_\_\_\_

Offending Contractor: \_\_\_\_\_

Prime Contractor: \_\_\_\_\_

DIR Registration Number: \_\_\_\_\_

Yes No N/A

\_\_\_ \_\_\_ \_\_\_ Has the contract been terminated?

\_\_\_ \_\_\_ \_\_\_ Has the contractor been terminated? (Also check the license of the  
qualifying person (QP) under the person's name)

QP's Name: \_\_\_\_\_

QP's CSLB Number: \_\_\_\_\_

\_\_\_ \_\_\_ \_\_\_ Does the contractor have an active contractor's license?

CSLB Number: \_\_\_\_\_

If not, when did the license expire? \_\_\_\_\_

## **Documents That Must Be Submitted with All Cases:**

\_\_\_ Print-out of this form

\_\_\_ Prime Contractor (if applicable) CSLB Number: \_\_\_\_\_

\_\_\_ Form C E M-2506 (Also, please e-mail Excel spreadsheet to HQ Wage Case)

\_\_\_ Form C E M-2507 (Case Summary)

\_\_\_ Form C E M-2508 (Source Document Audit – SDA Summary)

\_\_\_ Form C E M-2509 (SDA Checklist)

\_\_\_ Pre-job Checklist and Sign-in sheet

\_\_\_ Scope of Work (bid items)

\_\_\_ Special Provisions (front sheet)

\_\_\_ Wage Determinations (state and federal, if applicable)

\_\_\_ Correspondence between Caltrans and Contractor

\_\_\_ Certified Payroll Records

\_\_\_ Fringe Benefit Statements

\_\_\_ Trust Fund Statements

\_\_\_ Inspector Reports

\_\_\_ Source Document Audit / Date Conducted: \_\_\_\_\_

\_\_\_ Cancelled Checks \_\_\_ Form-D E 9

\_\_\_ Time Cards \_\_\_ Form-941

\_\_\_ Bank Statement \_\_\_ Form W-2

\_\_\_ Payroll Journal \_\_\_ Paycheck Stubs

\_\_\_ Employee Complaints (EEO Form)

\_\_\_ Case History of Events

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\_\_\_ Information from Labor Union or Labor Management Group

\_\_\_ Other: \_\_\_\_\_

### **Additional Information Needed for Specific Cases:**

#### **Misclassification**

Yes    No    N/A

- \_\_\_    \_\_\_    \_\_\_    Has LCO interviewed employees?
- \_\_\_    \_\_\_    \_\_\_    Inspectors/Resident Engineers (R E) interviews conducted?
- \_\_\_    \_\_\_    \_\_\_    Can Inspector/R E verify and confirm hours and work description on daily diaries?
- \_\_\_    \_\_\_    \_\_\_    Independent record of work performed/hours on job? (employee, union, etc.)

#### **Certified Payrolls – Not Submitted**

Yes    No    N/A

- \_\_\_    \_\_\_    \_\_\_    Violation by prime contractor?
- \_\_\_    \_\_\_    \_\_\_    Violation by subcontractor?
- \_\_\_    \_\_\_    \_\_\_    If YES, is subcontractor still working on project?
- \_\_\_    \_\_\_    \_\_\_    Employee interviews conducted?
- \_\_\_    \_\_\_    \_\_\_    Independent record of work performed on job? (employee, union, etc.)
- \_\_\_    \_\_\_    \_\_\_    Are Inspector/R E diaries complete?  
If NO, please explain: \_\_\_\_\_

#### **Fringe Benefit (FB) Underpayment/Non-Payment**

Yes    No    N/A

- \_\_\_    \_\_\_    \_\_\_    Has LCO contacted Trust Fund? If no, specify: \_\_\_\_\_
- \_\_\_    \_\_\_    \_\_\_    Did employees receive separate compensation for FB?  
If YES, please specify: \_\_\_\_\_
- \_\_\_    \_\_\_    \_\_\_    Other sources of information about failure to pay FB?  
If YES, please specify: \_\_\_\_\_

#### **Employees / Hours Missing from Certified Payrolls**

Yes    No    N/A

- \_\_\_    \_\_\_    \_\_\_    Did you obtain time cards for verification of hours and location work  
If NO, please specify: \_\_\_\_\_
- \_\_\_    \_\_\_    \_\_\_    Has LCO interviewed employees?  
If NO, please specify: \_\_\_\_\_

# Caltrans Labor Compliance Program Wage Case Checklist

## Summary

Please provide narrative summaries covering the following:

### **A. Statement of Issues.**

**B. Investigative Report (*detailed narrative including but not limited to how the investigation was conducted including worker declarations, reviewing certified payroll records, verification of employer payment contributions, etc.*).**

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**C. Audit Report** (*detailed explanation of how audit was completed addressing each of the issues above*).

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**D. Affected contractor and subcontractor information (*how affected contractor and subcontractor were informed of potential violations; summary of their response with respect to violations and penalty issues; and any other information considered in determining recommended penalties*).**

**E. Recommended penalties under Labor Code Section 1775(a) and basis for recommendation, including how factors in subsection (a)(2) of Section 1775 were applied to arrive at the recommended amount.**