

Vermont Community Development Program

Procurement and Contracts

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AGENCY OF COMMERCE & COMMUNITY DEVELOPMENT
DEPT. OF HOUSING & COMMUNITY DEVELOPMENT

Learning Objectives

- **Why Procurement**
- **When to Procure**
- **Types of Procurement**



Procurement

Procurement - The process of purchasing supplies, material, equipment and hiring of personnel

Prior to Procurement (Going out to Bid) be sure that the following have been obtained:

- **Environmental Release of Funds –**
Do not Post prior this would be a “Choice Limiting Action”
- **Solid Scope of Work**
- **Correct Davis Bacon Wage Rate Decision – *(if applicable)***
- **State Pass Throughs for Construction - this includes the HUD 4010 Form**
- **Section 3 Clause**



Procurement

To Ensure Federal & State Requirements are Met

After the Environmental Release is Received and Final Design is Secured

Determine Most Suitable Procurement Process to Follow

Procurement

For Procurement Compliance follow, 2 CFR Part 200.318,
if using CDBG funds for any Goods, Services or Contracts

Types of Procurement

- **Micro-Purchase not to exceed \$10,000.00**
- **Small Purchase – up to \$250,000.00**
- **Competitive Sealed Bids**
- **Competitive Negotiated Procurements**
- **Sole Source – *(Non-Competitive Negotiated Procurement)***
- **Turnkey**



Procurement – Micro-Purchase

For Goods or Services Not Exceeding \$10,000

Can be awarded without Solicitation of Competitive quotes
provided the cost is considered reasonable

Construction Contracts subject to Davis Bacon wage rate
Threshold is \$2,000



Procurement- Small Purchase

Small Purchase can be used for Securing goods or services up to \$250,000

Requires at least 3 quotes for Price or Rate from 3 qualified Sources

If fewer than 3 quotes are obtained, it must be documented that 3 potential sources are not available



Procurement- Sole Source

Urgent/Emergency

Goods and Services are Unique

Requires Approval from ACCD



Procurement- Competitive Negotiations Proposals

Competitive Negotiation Proposals is an Effective way to Request for Qualifications (RFQ) for an Architect, Engineer or Construction Manager

- **In the RFQ do not ask for Cost**
- **Minimum of 2 Proposals**
- **Evaluate and Interview**
- **Negotiate Price and Award Contract to Qualified Firm**

Procurement- Competitive Negotiations Proposals

Request for Proposal for a Grant Administrator (RFP)

- Advertise and Send to Target Market
- Evaluate and Interview
- Can Negotiate or Ask for Price



Procurement- Sealed Bids

Preferred Method of Procurement for Construction Projects

- Detailed Specifications and Plans
- Include Wage Rates and Federal Regulations
- Advertise
- Public Bid Opening
- Project Awarded to Lowest Qualified Bidder
- Results in a Fixed Price Contract
- Minimum of 2 Bids Required



Procurement – Useful Information to Know

The Same Architect for a Planning Grant and Implementation Grant if:

- If the Initial RFP at the Planning Stage Contained Language Stating that the Firm or Individual Selected Might be Awarded a Contract for Implementation
- The Initial RFP cannot be more than 3 Years Old

Procurement – General Contractor (GC) VS Construction Manager (GC)

General Contractor

- Fixed Price or Not-to-Exceed Contract will be executed with GC
- Set Price for Project to Build What's on Construction Documents
- Has Employees to work on Project or /and will Hire Sub-Contractors
- Bids Opened at 1 Time (Public Bid Opening)

Construction Manager

- Comes in Early in the Development process to get a more accurate cost estimate
- More Flexibility in making necessary changes to project scope in per-development
- Guaranteed Maximum Price
- CM should Exclude Their Self as part of selection if Their own Firm is Bidding on Part of the Project



Procurement Check List

- Bidding & Selection Process Documented
- Advertisement Complete (Tear sheet) & Documented
- Evidence of Outreach to Minority, Women-owned or Small businesses & Section 3 Businesses
- Correct Wage Rate
- State Pass Throughs for Construction that includes the HUD 4010 Form
- Reference to Civil Rights, Labor Standards and Other Statutory Requirements, as Appropriate
- Bidding Instruction was Clear & Specifications Completed
- Basis for Selection Clearly Stated



Procurement Checklist Continued

- Bid published/ Quotes
- Where was the Bid/Quote Published
- Bid Opening Date
- Evidence of Minutes of Bid Opening
- Bid Tabulation
- Bid Bond
- Letters to Rejected Bidders Documented
- Lowest Bid Accepted
- Value Engineering Conducted, if Yes, was proper Language in Bid Document
- Fixed Price Contract



Contracts

Learning Objectives:

- **Compliance with Federal and State Requirements**
- **Terms and Expectations for Performance**

Contracts

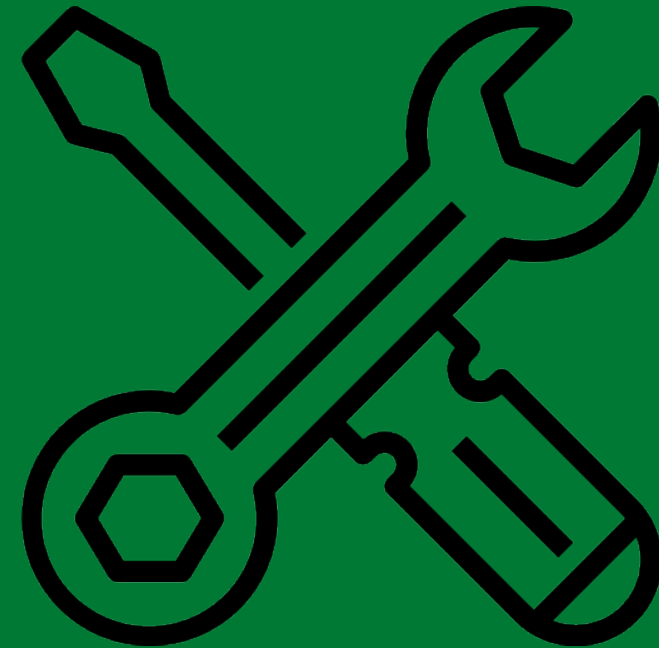
Contracts are Required for Goods and Services for Costs over \$1000
Minimum Requirements to be Included in a Contract:

- **Name of Parties**
- **Method of Compensation**
- **Scope of Services**
- **Location of Project**
- **Section 3 Clause**
- **State Pass-through Requirements**
- **Conflict of Interest**
- **Dispute Resolution**

Contracts Continued

Construction Contracts Must Additionally Include:

- Plans and Specifications
- Cost Estimates, Deductive and Alternative
- Pre-Construction Meeting
- Labor Standards Compliance
- Bonding and Insurance Requirements
 - Payment Bond, 100% of Contract
 - Performance Bond, 100% of Contract
- Retainage and Contingency
- Fixed Price not to Exceed



Contracts – Before Execution

- Be Sure to Verify the Prime Contractor & Subcontractors are not listed on the HUD Debarment List at
- <https://sam.gov/content/home>
- Verify the Prime Contractor has been Certified and Registered with the Vermont Secretary of State's Office to Perform Work in Vermont at:
- <https://bizfilings.vermont.gov/online/BusinessInquire/>
- Verify the Prime Contractor and Subcontractors are not listed on the State Debarment List at:
- <https://bgs.vermont.gov/purchasing-contracting/debarment>

Contracts - Requirements

AIA 133 for Construction Manager

or

AIA 101 for General Contractor

or

Sample Contract from the Grants Management Guide
Insurance(s)

Performance and Payment Bonds

VCDP Grant Agreement Attached to Contract

Pre-Construction Meeting

Labor Standards Learning Objectives:

- Requirements for Federal and State Compliance
- Requirements to be met during Construction
- Reviewing Certified Payrolls and Working Condition Requirements

Labor Standards

The 3 Major Components of the Labor Standards

1. Davis Bacon

**2. Contract Work Hours
&**

Safety Standards Act

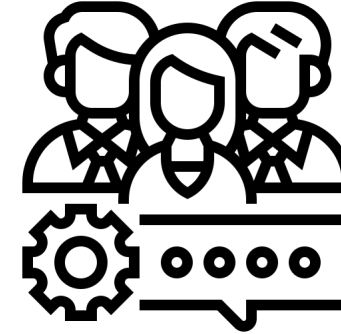
3. Copeland Anti-Kickback Act



Exemption from Labor Standards

Projects Exempt from Davis Bacon:

- Housing Projects of less than 7 Units for CDBG
and less than 12 Units for HOME
- CDGB Funds are for Acquisition Only
- Demolition – Only Projects



Employees Exempt from Davis Bacon:

- Apprentices Registered in a Bona Fide Apprenticeship Program, Approved by the Department of Labor
- Trainees enrolled in a Department of Labor Approved Training Program

Labor Standards- Contract Work Hours & Safety Standards

Contract Work Hours & Safety Standards Act (CWHSSA)

- **Wages based on a 40- hour Workweek**
- **Overtime pay is Time and a half for hours worked over 40**
- **Prohibits Exposure to Unsanitary, Hazardous or**
- **Dangerous Working Conditions**



Labor Standards-Copeland Anti-Kickback Act

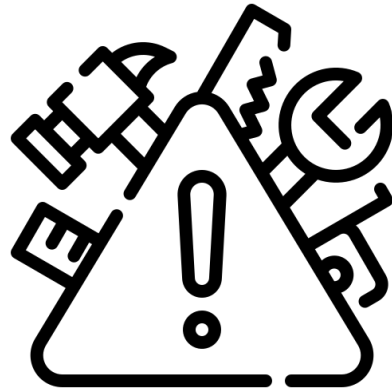
- **Prohibits a Building Contractor or Subcontractor from Inducing an Employee into Giving Up any Part of the Compensation that they are entitled to under the terms of their employment contract.**
- **Requires that Employees are Paid Weekly and that Employers File Weekly Compliance Reports.**

Labor Standards- Other Requirements

Equal Employment Opportunity (EEO)

And

Workplace Discrimination Laws and Policies are followed.



Davis Bacon Review: Learning Objectives

- Determine the Correct Wage Rate
- File a Conformance Form –SF1444
- Review a Certified Payroll
- Perform Interviews
- Reporting in GEARS

First-Determining the Wage Rate

Types of Work:

Davis-Bacon wage decisions are established for 4 broad types of construction work (*see also All Agency Memoranda 130 & 131, available at wdol.gov*):

1. Residential:

Construction, rehabilitation or repair of single-family homes and apartment building **No More than 4 Stories**, including incidental items such as site work, parking areas, utilities, streets and sidewalks, unless there is an established area practice to the contrary.

2. Building:

Construction, rehabilitation or repair of apartment buildings **greater than 4 stories**, sheltered enclosures with walk-in access for the purpose of housing people, machinery, equipment or supplies

3. Highway

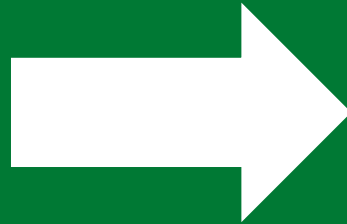
Construction, rehabilitation or repair of roads, streets, highways, sidewalks, parking areas and most other paving work not incidental to residential, building or heavy construction

4. Heavy

A “catch-all” type which includes those projects which cannot be classified as “residential”, “building”, or “highway”. Examples include dredging, sanitary and storm sewers, water mains and supply lines, dams, and flood control projects

Once the Wage Rate is Determined

The Correct Wage Rate should be included in the Request for Proposal (RPF) Documents



It will also be part of the Prime Contractors Executed Contract



Davis Bacon Wage Decision Form

1. Wage Decision

2. Type

3. County

4. SUVT1990-012

5. Fringe



AGENCY OF COMMERCE & COMMUNITY DEVELOPMENT
DEPT. OF HOUSING & COMMUNITY DEVELOPMENT

2/17/2021 beta.SAM.gov | Search

1 "General Decision Number: VT20210006 01/01/2021"

Superseded General Decision Number: VT20200006

State: Vermont

2 Construction Type: Residential

3 County: Windham County in Vermont

RESIDENTIAL CONSTRUCTION PROJECTS (consisting of single family homes and apartments up to and including 4 stories)

Note: Under Executive Order (EO) 13658, an hourly minimum wage of \$10.95 for calendar year 2021 applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2015. If this contract is covered by the EO, the contractor must pay all workers in any classification listed on this wage determination at least \$10.95 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract in calendar year 2021. If this contract is covered by the EO and a classification considered necessary for performance of work on the contract does not appear on this wage determination, the contractor must pay workers in that classification at least the wage rate determined through the conformance process set forth in 29 CFR 5.5(a)(1)(ii) (or the EO minimum wage rate, if it is higher than the conformed wage rate). The EO minimum wage rate will be adjusted annually. Please note that this EO applies to the above-mentioned types of contracts entered into by the federal government that are subject to the Davis-Bacon Act itself, but it does not apply to contracts subject only to the Davis-Bacon Related Acts, including those set forth at 29 CFR 5.1(a)(2)-(60). Additional information on contractor requirements and worker protections under the EO is available at www.dol.gov/whd/govcontracts.

Modification Number	Publication Date
0	01/01/2021
4* SUVT1990-012	01/18/1990

	Rates	5 Fringes
Bricklayer.....	\$ 7.93	
Carpenter.....	\$ 7.25	
Cement mason.....	\$ 7.25	
Electrician.....	\$ 7.25	
Insulator/asbestos worker.....	\$ 7.25	
Laborers:		

https://beta.sam.gov/wage-determination/VT20210006/0?index=wd&is_active=true&date_filter_index=0&date_rad_selection=date&wdType=dbra&con... 1/4

Conformances

- **Additional Classifications:**
 - At times, the wage decision will not contain some of the work classifications and wage rates that will be needed for the construction work.
- **Contact the Union:**
 - If Wage rates are Union rates- they may have the needed classification.
- **Standard Form 1444 13d**
 - Complete the “Request For Authorization of Additional Classification and Rate Form (SF 1444 13d), including Signatures. Forward Form to ACCD Grants Management Specialist Juliann.sherman@vermont.gov . The form will then be sent to the DOL Mailbox at: whd-cbaconformance_incoming@dol.gov.

Standard Form 1444: Request for Additional Classification & Rate

5. Contract Number

6. Date Bid Opened

7. Date of Award

8. Date Contract Work Started

REQUEST FOR AUTHORIZATION OF ADDITIONAL CLASSIFICATION AND RATE		CHECK APPROPRIATE BOX <input type="checkbox"/> SERVICE CONTRACT <input type="checkbox"/> CONSTRUCTION CONTRACT		OMB Control Number: 9000-0066 Expiration Date: 4/30/2022	
<small>Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 9000-0066. We estimate that it will take .5 hours to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: U.S. General Services Administration, Regulatory Secretariat Division (M1V1CB), 1800 F Street, NW, Washington, DC 20405.</small>					
INSTRUCTIONS: THE CONTRACTOR SHALL COMPLETE ITEMS 3 THROUGH 16, KEEP A PENDING COPY, AND SUBMIT THE REQUEST, IN QUADRUPLICATE, TO THE CONTRACTING OFFICER.					
1. TO: ADMINISTRATOR, WAGE AND HOUR DIVISION U.S. DEPARTMENT OF LABOR WASHINGTON, DC 20210			2. FROM: (REPORTING OFFICE)		
3. CONTRACTOR				4. DATE OF REQUEST	
5. CONTRACT NUMBER	6. DATE BID OPENED (SEALED BIDDING)	7. DATE OF AWARD	8. DATE CONTRACT WORK STARTED	9. DATE OPTION EXERCISED (IF APPLICABLE) (SERVICE CONTRACT ONLY)	
10. SUBCONTRACTOR (IF ANY)					
11. PROJECT AND DESCRIPTION OF WORK (ATTACH ADDITIONAL SHEET IF NEEDED)					
12. LOCATION (CITY, COUNTY, AND STATE)					
13. IN ORDER TO COMPLETE THE WORK PROVIDED FOR UNDER THE ABOVE CONTRACT, IT IS NECESSARY TO ESTABLISH THE FOLLOWING RATE(S) FOR THE INDICATED CLASSIFICATION(S) NOT INCLUDED IN THE DEPARTMENT OF LABOR DETERMINATION					
NUMBER: _____		DATED: _____			
a. LIST IN ORDER: PROPOSED CLASSIFICATION TITLE(S); JOB DESCRIPTION(S); DUTIES; AND RATIONALE FOR PROPOSED CLASSIFICATIONS (Service contracts only)		b. WAGE RATE(S)		c. FRINGE BENEFITS PAYMENTS	
<small>(Use reverse or attach additional sheets, if necessary)</small>					
14. SIGNATURE AND TITLE OF SUBCONTRACTOR REPRESENTATIVE (IF ANY)		15. SIGNATURE AND TITLE OF PRIME CONTRACTOR REPRESENTATIVE			
16. SIGNATURE OF EMPLOYEE OR REPRESENTATIVE		TITLE		CHECK APPROPRIATE BOX-REFERENCING BLOCK 13. <input type="checkbox"/> AGREE <input type="checkbox"/> DISAGREE	
TO BE COMPLETED BY CONTRACTING OFFICER (CHECK AS APPROPRIATE - SEE FAR 22.1019 (SERVICE CONTRACT LABOR STANDARDS) OR FAR 22.406-3 (CONSTRUCTION WAGE RATE REQUIREMENTS))					
<input type="checkbox"/> THE INTERESTED PARTIES AGREE AND THE CONTRACTING OFFICER RECOMMENDS APPROVAL BY THE WAGE AND HOUR DIVISION. AVAILABLE INFORMATION AND RECOMMENDATIONS ARE ATTACHED.					
<input type="checkbox"/> THE INTERESTED PARTIES CANNOT AGREE ON THE PROPOSED CLASSIFICATION AND WAGE RATE. A DETERMINATION OF THE QUESTION BY THE WAGE AND HOUR DIVISION IS THEREFORE REQUESTED. AVAILABLE INFORMATION AND RECOMMENDATIONS ARE ATTACHED. <small>(Send 3 copies to the Department of Labor)</small>					
SIGNATURE OF CONTRACTING OFFICER OR REPRESENTATIVE		TITLE AND COMMERCIAL TELEPHONE NUMBER		DATE SUBMITTED	



Reviewing WH-347 Payroll Forms

How to Correctly Fill Out a WH-347 Payroll Form

The completion of the WH-347 Payroll Form is optional; contractors may utilize their own payroll system as long as it conforms to the WH-347 Payroll Form and contains all the necessary information. If you utilize WH-347 Payroll Form as a pdf, saving it electronically aids in making any needed corrections.

Check one of the boxes and list name of contractor or subcontractor


The last day of the payroll period.

Fill out completely with contractor or subcontractor address

U.S. Department of Labor
Employment Standards Administration
Wage and Hour Division

PAYROLL
(For Contractor's Optional Use; See Instructions at www.dol.gov/esa/whd/forms/wh347Instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.



WHD
U.S. Wage and Hour Division
Rev. Dec. 2008

NAME OF CONTRACTOR OR SUBCONTRACTOR

Sample Construction Company

ADDRESS 385 West Drive, Madison WI 53703

OMB No.: 1215-0149
Expires: 12/31/2011

PAYROLL NO. 8

FOR WEEK ENDING 04/24/2010

PROJECT AND LOCATION
Robin Street Apartments, Delafield WI 53018

PROJECT OR CONTRACT NO.
3000

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER OF WORKER)	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK					
			Sun	Mon	Tue	Wed	Thu	Fri	Sat				FICA	WITH-HOLDING TAX	State with-holding tax	Medicare	OTHER		TOTAL DEDUCTIONS				
																				HOURS WORKED EACH DAY			
Alex Driver - #####	2	Power Equipment Bull Dozer Group						2.00	2.00	\$62.83	\$1,422.84						\$161.00	\$185.15	\$156.97	\$50.31	\$85.00	\$538.43	\$1,374.03
					8.00	8.00	3.58	6.00	27.50	\$130.188	\$2,012.46												

Payrolls must be numbered sequentially and should be based on the weeks worked under a contract.

Type the word "Final" when the last payroll is submitted for the project.

Indicate the days and dates of the pay period. (should match week ending directly above)

The name and location of project.

The prime contractor should include the project number as listed in the loan

List each worker's name.

Only laborers and mechanics performing construction work under the contract should be listed.

Please note: Business Owners need only include their name, work classification including "owner" and the daily total hours worked.

Specify the job classification located in the contract wage decision and/or the corresponding job title.

List hourly wage rate and fringes paid in cash (not those paid to plans)



Specify the net amount paid to the employee for the pay

(For Contractor's Optional Use; See Instructions at www.dol.gov/esa/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

Company Name: _____ ADDRESS: 365 West Drive, Madison WI 53703

FOR WEEK ENDING: 04/23/2010 PROJECT AND LOCATION: Robin Street Apartments, Delafield WI 53018 PROJECT OR CONTRACT NO.: 3000

NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER OF WORKER)	NO. OF MONTHS EMPLOYED	WORK CLASSIFICATION	EMPLOYER'S CODE	(4) DAY AND DATE							TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS				(9) NET WAGES PAID FOR WEEK				
				Sun	Mon	Tue	Wed	Thu	Fri	Sat				FICA	UNEMPLOYMENT	STATE	TOTAL DEDUCTIONS					
				18	19	20	21	22	23	24				HOURS WORKED EACH DAY	HOURS	AMOUNT	AMOUNT		AMOUNT	AMOUNT		
Alex Driver - #####	2	Power Equipment Bull Dozer Group 2	0						3.00	2.00	\$62.83	\$1,422.84					\$161.00	\$538.43	\$1,374.03			
Jason Worker - #####	2	General Laborer	0						4.00	4.00	\$49.20	\$1,700.78					\$136.06	\$457.71	\$1,233.07			
Special Worker - #####		Employer	0						1.50	1.50	\$60.19	\$90.28					\$111.00	\$128.35	\$47.19	\$1,406.19		
		Apprentice Carpenter 1st 6 mo. at 40%	0						40.00	40.00	\$30.52	\$1,221.44					\$85.18	\$105.41	\$90.50	\$26.62	\$307.71	\$757.01
		Plumber	0						20.00	20.00	\$67.88	\$1,357.60										
Roy Wrench - #####	5	Steamfitter	0						20.00	20.00	\$69.13	\$1,382.60					\$163.46	\$147.11	\$118.51	\$51.08	\$480.16	\$1,563.04
Bart Turner - #####	1	Power Equipment Rotary Drill Group 4	0						24.00	24.00	\$60.80	\$1,459.20					\$155.06	\$142.48	\$122.33	\$35.98	\$415.93	\$1,023.27

Must accurately reflect Overtime and straight time hours worked under the contract.

Specify the total overtime and straight time hours worked on the project.

Specify the gross earnings for the hours worked under the contract.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to furnish weekly a statement with respect to the wages paid each week. 29 C.F.R. § 5.5(a)(3)(i) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" certifying that the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information for compliance with the Davis-Bacon Act. This information is used to determine if the contractor is complying with the Davis-Bacon Act. If you are a contractor or subcontractor, you should retain a copy of this information for your records. If you are a laborer or mechanic, you should retain a copy of this information for your records. If you are a laborer or mechanic, you should retain a copy of this information for your records.

If part of a worker's weekly wage was earned on projects other than the project described on this payroll, enter the gross amount earned on this contract in the top half of column 7. Enter the gross amount earned during the week for all projects in the bottom half.

Alex Driver worked 29.5 hours on this contract and 12.5 hours on another contract. The gross wages earned on this project, \$1,422.84, is entered in the top half of column 7. The gross wages earned on all projects, \$2,012.46, is entered in the

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	DEDUCTIONS					NET WAGES PAID FOR WEEK	
			Sun	Mon	Tue	Wed	Thurs	Fri	Sat				FICA	WITH- HOLDING TAX	State with- holding tax	Medicare	OTHER		TOTAL DEDUCTIONS
18	19	20	21	22	23	24													
Alex Driver - #####	2	Power Equipment Bull Dozer Group 2						2.00		2.00	\$62.83	\$1,422.84	\$61.00	\$183.15	\$156.97	\$50.31	\$85.00	\$638.43	\$1,374.03
					8.00		5.50	6.00		27.50	\$130.165	\$2,012.46							
Jason Worker - #####	2	General Laborer								4.00	\$40.20	\$1,700.78	\$35.05	\$156.47	\$132.66	\$42.52	\$467.71	\$1,233.07	
				8.00	8.00	8.00	8.00	8.00		40.00	\$17.27	\$1,700.78							
Sharon Wood- #####	3	Carpenter								1.50	\$60.19	\$1,887.49	\$151.00	\$154.77	\$128.35	\$47.19	\$481.31	\$1,406.18	
				8.00	8.00	8.00	8.00	8.00		40.00	\$30.52	\$1,887.49							
Reggie Tree - #####	1	Apprentice Carpenter 1st 6 mo. at 40%									\$32.72	\$1,064.72	\$85.18	\$105.41	\$90.50	\$26.62	\$307.71	\$757.01	
				8.00	8.00	8.00	8.00	8.00		40.00	\$12.21	\$1,064.72							
Roy Wrench - #####	5	Plumber									\$67.88	\$1,004.80							
				8.00				4.00	8.00	20.00	\$35.28	\$1,004.80							
Roy Wrench - #####	5	Steamfitter									\$69.13	\$1,038.40	\$163.46	\$147.11	\$118.51	\$51.08	\$480.16	\$1,563.04	
				8.00	8.00			4.00		20.00	\$34.41	\$1,038.40							
Bar Turner - #####	1	Power Equipment Rotary Drill Group 4									\$60.80	\$719.28	\$115.53	\$142.48	\$122.33	\$35.98	\$415.53	\$1,023.27	
				8.00	8.00			8.00		24.00	\$29.97	\$719.28							
												\$1,439.20							

If an employee performs multiple work classifications under the contract, use two or more lines to distinguish the different job classifications, hours worked, and hourly wage earned for each.

Combine the two classifications when recording the gross amount earned for this pay period, deductions, and net wages.

A registered apprentice performing work under a contract must be reported. The payroll must include the current pay scale & provide a copy of the apprenticeship agreement.

PAYROLL

Optional Use; See Instructions at www.dol.gov/esa/whd/forms/wh347

Required to respond to the collection of information unless it displays a currently valid OMB control number

Provide explanation of "other" deductions on signatory page.



ADDRESS 385 West Drive, Madison WI 53703

Form No. WH-347 5-0149 Expires 12/31/2011

PROJECT AND LOCATION
Robin Street Apartments, Delafield WI 53018

PROJECT OR CONTRACT NO.
3000

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF (c) EXCEPTIONS	(3) WORK CLASSIFICATION	(4) DAY AND DATE							(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS					(9) NET WAGES PAID FOR WEEK						
			OT	D	S	Su	Mo	Tu	We				Th	Fr	Sa	FICA	WITH-HOLDING TAX		State withholding tax	Medicare	OTHER	TOTAL DEDUCTIONS		
																							18	19
Alex Driver - #####	2	Power Equipment Bull Dozer Group 2							2.00	2.00	\$62.83	\$1,422.84						\$161.00	\$185.15	\$156.97	\$50.31	\$85.00	\$638.43	\$1,374.03
Jason Worker - #####	3	General Laborer			9.00	9.00	3.00	6.00		4.00	\$49.20	\$2,012.46						\$136.06	\$156.47	\$132.66	\$42.52		\$467.71	\$1,233.07
Sharon Wood- #####	3	Carpenter						1.50	1.50	\$60.19	\$1,887.49						\$151.00	\$154.77	\$128.35	\$47.19		\$481.31	\$1,406.18	
Reggie Tree - #####	1	Apprentice Carpenter 1st 6 mo. at 40%									\$32.72	\$1,887.49						\$85.18	\$105.41	\$90.50	\$26.62		\$307.71	\$757.01
Roy Wrench - #####	5	Plumber									\$67.88	\$1,004.80												
Roy Wrench - #####	5	Steamfitter			9.00	9.00	4.00		20.00	\$34.41	\$1,038.40						\$163.46	\$147.11	\$118.51	\$51.08		\$480.16	\$1,563.04	
Bart Turner - #####	1	Power Equipment Rotary Drill Group 4			9.00	9.00		2.00	24.00	\$29.97	\$719.28						\$115.14	\$142.48	\$122.33	\$35.98		\$415.93	\$1,023.27	

Fringe benefits are not paid as cash to Bart Turner: explanation is included under "(c) exceptions" on signatory page.

While completion of Form 40 U.S.C. § 3145) contractor or mechanic has been paid

Employers generally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act requires employers to furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) for financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has received the wages and fringe benefits required by the contract. Federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Burden Statement

We estimate that it will take an average of 15 minutes per contractor or mechanic to complete this collection, including searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, ESA, U.S. Department of Labor, Room B3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210

Date 04/28/2010

I, Tiffany Payer Payroll Supervisor
(Name of Signatory Party) (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by

Sample Construction Company on the
(Contractor or Subcontractor)
Robin Street Apartments, Delafield WI; that during the payroll period commencing on the
(Building or Work)
18 day of 4, 2010, and ending the 24 day of 4, 2010

all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said

Sample Construction Company from the full
(Contractor or Subcontractor)

weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

Alex Driver - ##### - other deductions - \$85 for child support

Explanation of "other"

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

- in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

- Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION
Power Equipment Rotary Drill Group 4	paid directly to plan: health & dental at \$12.50 per hour and Pension at \$6.25 per hour

Explanation of exception to fringe benefits

REMARKS:

NAME AND TITLE: Robert Sample, Owner SIGNATURE: _____

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Interviews

Are REQUIRED and should be performed several times throughout the project during the:

1. Beginning
2. Middle
3. End

- Interviews should include.. the prime contractor, all sub-contractors, making sure to capture all the work classifications.
- Dependent on concerns over safety- interviews can be performed in person, over the phone, or email.
- Be sure to complete the interview form LEGIBLY.
- Interview Forms- HUD 11 Form, Record of Employee Interview, or HUD 4730 Federal Labor Standards Questionnaire.



Federal Labor Standards Questionnaire (Page 1)

- Project name, number and location
- 3.** When did you work on this project? (From, To)
- 10b.** If you answered yes to 10a, which fringe benefits did you receive?



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT Office of Labor Relations FEDERAL LABOR STANDARDS QUESTIONNAIRE		HUD FORM 4730 OMB Approval Number 2501-0018 (Exp. 01/31/2024)
<p>We are conducting a review of federal labor standards compliance on the project named below. We are asking for certain information regarding your employment on this project. Sending this questionnaire to you does not imply that your employer has violated any law.</p> <p>Please respond to all of the questions listed below. Your responses will be considered confidential and will not be released to anyone without your permission. Your answers should refer only to the time during which you worked on this project. Please return the completed form as soon as possible, using the envelope provided, which needs no postage.</p> <p>If you have any questions, please call:</p>		
Employer		Project name, number and location
1. Your name		2. Your job title
3. When did you work on this project? From: To:		4. Where did you work (job site, shop, etc)?
5. What duties did you perform on this project?		
6. What tools did you use (if any) to perform your duties on the project?		
7. How were you paid? (hourly wage, salary, piece work, etc.)		8. If your wage was based on piece work, how was your pay determined (i.e., \$ per board, per unit, etc.)?
9. What was your hourly wage on this project? \$	10a. Did you receive fringe benefits? Yes <input type="checkbox"/> No <input type="checkbox"/>	10b. If yes, which fringe benefits did you receive? Vacation <input type="checkbox"/> Medical <input type="checkbox"/> Pension <input type="checkbox"/> Other <input type="checkbox"/> Specify:
11. On average, how many hours did you work each week?	12. Did you ever work over 40 hours in a single week? Yes <input type="checkbox"/> No <input type="checkbox"/>	13. If you worked over 40 hours per week, did you receive overtime pay (at least 1½ times your regular rate of pay)? Yes <input type="checkbox"/> No <input type="checkbox"/>
14. If you did <u>not</u> receive overtime pay for overtime hours worked, identify the number of weeks in which overtime was worked and/or total overtime hours		
15. Attach copies of check stubs or a record of your hours and pay received <input type="checkbox"/> CHECK IF ATTACHED		16. Attach any other comments or statements on separate sheet <input type="checkbox"/> CHECK IF ATTACHED
Page 1 of 2		HUD-4730 (06/2004) PREVIOUS EDITION IS OBSOLETE

Federal Labor Standards Questionnaire (Page 2)

- Which employees that worked with you could confirm your work?
- Did you supervise any employees?
- Provide accurate information about addresses, phone numbers, and emails.
- Ensure you sign and date the forms where it highlighted in red.



17. Identify other employees (name, address, phone) who worked with you and who could confirm the type of work you performed

18. Identify employees (name, address, phone) you supervised

I affirm that the information provided herein is accurate to the best of my knowledge.

Employee name (Please print clearly)	Home phone number (including area code)
Current address (Include apartment number, if any) (Street/City/State/Zip Code)	Alternate phone number(s) (including area code)
Permanent/alternate address (if current address is temporary)	Email address
Signature	Date

Disclosure Authorization

I authorize the HUD representative to disclose my name and the information I have submitted to the extent necessary to enforce my rights under the Acts administered by the U.S. Department of Housing and Urban Development.

Signature: _____ **Date:** _____

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. The information is considered sensitive and will not be released without your approval. Provision of this is voluntary. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget (OMB) control number.

HUD and local agencies administering HUD-assisted programs must enforce Federal wage and reporting requirements on covered HUD-assisted construction and maintenance work. Enforcement activities include contacting laborers and mechanics and requesting information about their employment on covered projects.

Federal Labor Standards Davis Bacon Checklist

- b. Project Identifier (number, etc)
- i. Bid Opening Date
- j. Contract Award Date
- k. Construction Start Date
- l. % Complete or Completion Date

FEDERAL LABOR STANDARDS DAVIS-BACON CHECKLIST

Labor Standards Compliance – Davis-Bacon Covered Projects

1. Contract Identification

a. Project Name	b. Project Identifier (number, etc.)	
c. Location of Project (City, County, State)	d. Prime Contractor	
e. Description (scope) of work – include number of units & stories for housing projects		f. Contract Amount \$
g. Labor Standards Provisions (HUD Form Used)	h. Wage Decision No. Used – Include Type/Mod. Date	i. Bid Opening Date
j. Contract Award Date	k. Construction Start Date	l. % Complete or Completion Date

2. Contract Documents

	Yes	No	NA
a. Correct labor standards provisions incorporated in contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Correct wage decision incorporated in contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the prime contractor eligibility verification on file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Weekly Payrolls

a. Did agency obtain all payrolls (first to current/last) for each contractor on the job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. All contractors/trades represented by payrolls received?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Payroll data consistent with inspection & on-site reports?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Payroll certification statements signed by employer or authorized representative?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Apprentices or trainees reported on payrolls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Apprentice/Trainee certification obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Do payrolls report generic job classifications (e.g., "mechanic," "operator," "installer," "journeyman") not on wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Do payrolls report job classifications for which an "Additional Classification" request was necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Did the agency review to ensure that correct wages were paid, in accordance with the wage decision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Was the Contract Work Hours and Safety Standards Act (CWHSSA) threshold met?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Has any laborer or mechanic worked over 40 hours per week on this project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. If yes, has overtime been paid for hours worked over 40/wk?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Employee Interviews

	Yes	No	NA
a. Were Employee Interviews completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Did Agency target interviews?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Did interviews record work performed by worker and observed by the interviewer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Were interviews compared with payrolls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GEARS Davis-Bacon Reporting

- VCDP staff create
- Found under Related Documents and Messages in the Application

Menu Forms Menu Status Changes Management Tools **Related Documents and Messages**

Back

VCDP Davis-Bacon Certified Payroll Reporting Menu - Forms

Please complete all required forms below.

Document Information: **DBCP-2021-Brattleboro-00004**
Parent Information: **07110-IG-2021-Brattleboro-03**
[Details](#)

Forms

Status	Page Name	Note	Created By	Last Modified By
	Payroll Contractor & Wage Decision		Auditor 1	4/12/2022 10:21:44 AM
	Payroll Upload and Review			
	Corrective Action Form			

GEARS Davis-Bacon Reporting

- Payroll Contractor & Wage Decision page only needs to be completed once with the current wage rate(s) unless you need to have to request for an authorization of additional classification & rate

[Menu](#) [Forms Menu](#) [Status Changes](#) [Management Tools](#) [Related Documents and Messages](#)

[Back](#)

Document Information: [DBCP-2021-Brattleboro-00004](#)
Parent Information: [07110-IG-2021-Brattleboro-03](#)

[Details](#)

You are here: > [VCDP Davis-Bacon Certified Payroll Reporting Menu](#) > [Forms Menu](#)

PAYROLL CONTRACTOR & WAGE DECISION

Please complete prime and subcontractors for each Wage Decision used for the project.

If an additional classification is required was the request submitted to the US Department of Labor, please upload the executed [Standard Form 1444](#).

To create a new wage decision form click on "Add" in the gray bar at the top and a new blank form will appear complete and save the page. When multiple pages have been saved a dropdown on the right will appear titled by the wage decision number provided on the page, to navigate between pages select the wage decision number in the dropdown and hit go beside it and it will go to that page.

Davis-Bacon Wage Reporting for 07110-IG-2021-Brattleboro-03, Testing Davis Bacon

1. Contractor Company Name(s):

*
2. Please Upload:
 - a. Photo of your posted Davis-Bacon/Labor Policies: * No file chosen
 - b. Copy of your Wage Decision: * No file chosen
3. Wage Decision Number:
*
4. Request for Authorization of Additional Classification and Rate ([Standard Form 1444](#)): No file chosen

GEARS Davis-Bacon Reporting

- Payroll Upload and Review page must be completed for each payroll period being reported

PAYROLL UPLOAD AND REVIEW

Please complete and save the form below for each payroll period. At a minimum it must be reported monthly through the completion of the project. Administrators must be reviewing payrolls weekly and need to upload payrolls monthly.

When a new contractor or subcontractor comes onsite a sampling of those employees must be interviewed and documentation must be uploaded the reporting period.

To create a new form click on "Add" in the gray bar at the top and a new blank form will appear complete and save the page for that period. When multiple pages have been saved a dropdown on the right will appear titled by the end date provided on the page, to navigate between pages select the period end date in the dropdown and hit go beside it and it will go to that page.

Payroll Reporting Period: Start Date: Period End Date:

Final Payroll for Review

Upload Certified Payroll (legible) Documentation: * No file chosen

Upload Apprenticeship Documentation: No file chosen

Upload [Employee Interview \(HUD Form 4730\)](#) Documentation: No file chosen

Document Name: No file chosen

	Municipal/Administrator Review	ACCD Review
1. Correct Wage Decision used?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
2. Contractor/sub-contractor name and address included?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
3. Week start and end date included?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
4. Payroll appropriately numbered?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
5. Employee names and last four digits of SSN or employee ID Included?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
6. Appropriate work classifications used?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
7. Appropriate wages paid for straight time hours?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
8. Appropriate wages paid for O/T hours?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
9. Total hours correctly calculated/included?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
10. Deductions correctly reported?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
11. Apprenticeship ratio to journeymen correct?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
12. Apprenticeship documentation?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
13. Payroll information complete?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
14. Indication of fringe paid or cash in lieu of fringe?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
15. Are payroll Statement of Compliance signed?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
16. Payrolls signed by authorized representative?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
17. Proper posting of Davis-Bacon/labor notices?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
18. Employee interviews conducted?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
19. Are all certified payrolls for contractors and subcontractors for this time period reported?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

Municipal/Grant Administrator Reviewer

Reviewer Name:
Reviewer Title:
Date:

ACCD Reviewer

Reviewer Name:
Reviewer Title:
Date:

GEARS Davis-Bacon Reporting

- **Corrective Action Plan must be completed for each payroll period being reported**
- **Submit payrolls weekly**
- **Change the status when complete**



CORRECTIVE ACTION FORM

Please complete and save the form below for each payroll period through completion of the project.

To create a new form click on "Add" in the gray bar at the top and a new blank form will appear complete and save the page for that period. When multiple pages have been saved a dropdown on the right will appear titled by the end date provided on the page, to navigate between pages select the period end date in the dropdown and hit go beside it and it will go to that page.

Please fill out any corrective actions needed, based on your review of the payroll, or check the *N/A (No corrections this reporting period)* checkbox if there are no corrections this period.

Please respond to each corrective action and provide documentation from the contractors to support your response.

Payroll Reporting Period: Start Date: Period End Date:

N/A (No corrections this reporting period)

Corrective Action Type: RESTITUTION

Select the corrective action type(s) from the list: (CTRL-click to select multiple items)

Correct Wage Decision not used
Appropriate Work Classification not used
Appropriate wages not paid for straight time hours

Documented by: Municipality/Administrator ACCD

Description of Corrective Action Needed:

of Employees Affected:

Total \$ Straight Time Restitution:

Total \$ O/T Restitution:

Total \$ Restitution:

MUNICIPALITY/ADMINISTRATOR FOR CONTRACTOR: When Restitution is Required:

Download the Employee Restitution Worksheet and have the contractor complete a worksheet for each employee that requires restitution.

[Download Worksheet >](#)

Municipality/Administrator's Description of Contractor Response:

Restitution Worksheet(s) Upload:

No file chosen

Additional Contractor Upload:

No file chosen

Correction Approved by Municipality/Administrator? Yes No

Correction Approved by ACCD? Yes No

Corrective Action Type: CORRECTED PAYROLL (NON-RESTITUTION)

Select the corrective action type(s) from the list: (CTRL-click to select multiple items)

Contractor or subcontractor name and address not included/not correct
Week start and end date not included/not correct
Payroll not appropriately numbered

Documented by: Municipality/Administrator ACCD

Questions

Thank You

Contact:

Name: Juliann Sherman

Email: Juliann.Sherman@vermont.gov

Phone: (802)-828-5226



**AGENCY OF COMMERCE & COMMUNITY DEVELOPMENT
DEPT. OF HOUSING & COMMUNITY DEVELOPMENT**