CITY OF SPRINGFIELD PUBLIC CONSTRUCTION WEEKLY OATH OF COMPLIANCE WITH RESPONSIBLE EMPLOYER ORDINANCE

This form must be completed by all contractors and subcontractors for each week in which they perform work on the project. Contractors and subcontractors are not required to submit this form for any week in which no work was performed. Forms shall be returned to the Compliance Project Manager at the address below.

| DATE: | | | | | |
|-----------------------------|--------------------------------------|----------------------------|--|---------------|--|
| CONTRACTOR: | | | | | |
| PROJECT: | | | | | |
| CONTRACT NO.: | | | | | |
| I, | , on behalf of | | | | |
| hereby certify that | , on behalf of (Name of business) | was in compliance v | with the City of | | |
| Springfield's Responsib | le Employer Ordinance dur | ing the week of(dat | tes) | | |
| I further certify the follo | wing employees performed | work on the project during | g the above referer | nced week: | |
| Name | Address | Race/Ethni | <u>city</u> <u>Gende</u> | er <u>Vet</u> | |
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| | | | | | |
| Signature: | | Plea | Please return this form to: | | |
| Printed Name: | | | DTAC | | |
| · | or): | 36 | Project Manager 36 Court St., Room 412 Springfield, MA 01103 | | |
| Date: | | | | | |