Date

(Company President)

(Prime Contractor Name)

(Address)

Re: (Contract ID), Certified Payrolls, Delinquent Notice 2

Dear \_\_\_\_\_\_\_\_\_\_\_\_:

The certified payroll(s) for week(s) ending (\_\_\_\_\_\_\_\_\_\_\_\_\_\_) continue(s) to be delinquent from your (company/subcontractor, name) beyond 30 calendar days from the first notification sent to you and received on (enter date). Payments for work items performed by your (company/subcontractor, name) continue to be suspended. In addition, non-compliance damages are being assessed on a calendar day basis retroactively to (date the first notice was received). Payments will continue to be suspended for work items performed by your (company/subcontractor, name) and non-compliance damages will be assessed until complete and accurate certified payrolls are current and received by this office.

You are hereby notified that if the weekly certified payroll(s) continue to be delinquent beyond 30 calendar days from the receipt of this notification, payments will be rescinded for all work performed by your (company/subcontractor name) that were previously paid on the project . In addition, interim Contractor Performance Evaluations will be issued reflecting the non-compliance with contract requirements by your (company/subcontractor, name).

 Sincerely,

 Name

 Construction Engineer

 (Name of company, agency or TSC)

Sent by certified mail receipt requested or other method which establishes the date received by the prime contractor

cc: Subcontractor (via regular mail if needed)

cc: Region coordinator for prevailing wage

cc: C&T Division prevailing wage compliance specialist