

EXHIBIT VIII-D

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| U.S. DEPARTMENT OF LABOR EMPLOYMENT STANDARDS ADMINISTRATION | REQUEST FOR DETERMINATION AND RESPONSE TO REQUEST | | (Davis Bacon Act as Amended and Related Statutes) | | |
| FOR DEPARTMENT OF LABOR USE Response to Request a. <input type="checkbox"/> Use Area determination issued for this area _____ _____ b. <input type="checkbox"/> The attached decision noted below is applicable to this project. | Requesting Officer (typed name and signature) | | CHECK OR LIST CRAFTS NEEDED (Attach continuation sheet if needed) <input type="checkbox"/> Asbestos workers <input type="checkbox"/> Boilermakers <input type="checkbox"/> Bricklayers <input type="checkbox"/> Carpenters <input type="checkbox"/> Cement masons <input type="checkbox"/> Electricians <input type="checkbox"/> Glaziers <input type="checkbox"/> Ironworkers <input type="checkbox"/> Laborers, (Specify classes) _____ _____ _____ <input type="checkbox"/> Lathers <input type="checkbox"/> Marble & tiles setters, terrazzo workers <input type="checkbox"/> Painters <input type="checkbox"/> Pile drivers <input type="checkbox"/> Plasterers <input type="checkbox"/> Plumbers <input type="checkbox"/> Roofers <input type="checkbox"/> Sheet metal workers <input type="checkbox"/> Soft floor layers <input type="checkbox"/> Steamfitters <input type="checkbox"/> Welders--rate for craft <input type="checkbox"/> Truck drivers <input type="checkbox"/> Power equipment operators, (Specify type) _____ _____ _____ _____ <input type="checkbox"/> Other crafts _____ _____ _____ | | |
| | Department, Agency, or Bureau | | | Phone Number | |
| | Date of Request | Est. Advertising Date | | Est. Bid Opening Date | |
| | Decision Number | Prior Decision Number (If any) | | Est. \$ Value of Contract | Type of Work |
| | Date of Decision | Location of Project (city or other description) | | | |
| | Expires | County | | State | |
| | Supersedes Decision Number | Address to which wage determination should be mailed. Must be complete and include ZIP Code. (Print or type) | | | |
| | Approved | Wage Survey by Agency Attached <input type="checkbox"/> YES <input type="checkbox"/> NO | | Wage Survey by Agency in Progress <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Description of Work (Be Specific) (Print or type) | | | | | |