Contractor Registration Closeout Form

| Contract Name: | |
|---|-------------|
| Contract Number: | |
| Prime Contractor: | PWCR: |
| Last date Prevailing Wage Covered Work was performed: | |
| All subcontractors have submitted Certified Payrolls in compliance with contract requirements including submittal of a "Final" payroll notice. No □ | |
| List the names and PWCR numbers for every subcontractor, sub-tier contractor, supplier and consultant that performed Prevailing Wage Covered Work on this Contract, including ready-mix concrete delivery. Attach additional pages if required. | |
| Contractor Name: | PWCR: |
| I, the undersigned, am the with the with the | |
| (Name) | (JOD TITLE) |
| authority to act for and on behalf of(Prime Contr. | |
| perjury that the above is true, complete and correct as submitted. | |
| Signed: | Date: |

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