



Wage & Hour Division
P.O. Box 30476, Lansing, Michigan 48909; Telephone: (517) 335-0400

PREVAILING WAGE COMMERCIAL SURVEY

Authority: Public Act No. 166 of 1965
This Form must be completed and submitted if you wish to include new wage data in the Division's database. If you do not wish to submit new data, data on file will be used.



The Wage and Hour Division is required by law to establish the state prevailing wage rates for state funded construction projects. The information you provide will assist the Division in doing so.



Please provide prevailing wages and fringe benefits currently in effect under the applicable collective bargaining agreement, and under any applicable understandings associated with the agreement. List rates separately for each geographic area and, if applicable, for each size of project for which there are different rates in effect.

Please provide name and address above.

On each rate sheet you complete, if there is only one pay rate in effect for a job classification, list that rate as the prevailing wage. If there is more than one pay rate in effect, list as the prevailing wage the one that has been the most frequently or commonly paid during the 60 days prior to completing this Survey. In determining the most common or frequent wage, include the pay rates in effect in the area even if a collective bargaining agreement or understanding excludes those rates from prevailing wage projects.

It is critical that you provide a copy of the pertinent collective bargaining agreement and the applicable understanding or understandings, if any, for each listed rate, and that you indicate the page numbers where all information is found as requested on the form. **Rates cannot be included in the state prevailing wage schedules if they are not submitted with a current collective bargaining agreement or understanding.**

I certify that the information I have provided on this survey form and attachments is true and correct to the best of my knowledge and belief. I further understand that the information provided is subject to verification by the Wage and Hour Division.

Printed Name: _____

Title: _____

Business telephone: _____

Signature: _____

Date: _____

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Michigan Department of Labor & Economic Growth
Wage & Hour Division

Geographic boundaries of Collective Bargaining Agreement (county, city, township, etc.) for classifications on this page. _____	If applicable, indicate size or dollar value of projects corresponding to rates listed on this page: <input type="checkbox"/> Not applicable _____
* Attach additional sheets if necessary	

7. Overtime Provisions

Indicate what page from the attached collective bargaining agreement or understanding this information is from

Mark the area that applies:

		Time & 1/2	Time & 1/2 after 40	Double Time	Not Applicable
MONDAY - FRIDAY	9th hour	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	10th hour	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	beyond 10 hours	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
SATURDAY	FIRST 8 hours	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	9th hour	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	10th hour	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
	beyond 10 hours	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
SUNDAYS & HOLIDAYS		<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Does the collective bargaining agreement allow an alternative of 4 ten-hour days without overtime payment?

On what page is that information found?

List each fringe benefit which is paid at a premium rate for overtime hours:

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Michigan Department of Labor & Economic Growth

Local Union _____

Wage & Hour Division

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Not applicable

 * Attach additional sheets if necessary

8. APPRENTICESHIP PROVISIONS

Please indicate what page of the agreement or understanding this information is found

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
<input type="text"/>	<input type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
<input type="text"/>	<input type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
<input type="text"/>	<input type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
<input type="text"/>	<input type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			

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Local Union _____

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If applicable, indicate size or dollar value of projects corresponding to rates listed on this page:

Not applicable

* Attach additional sheets if necessary

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
	<input style="width: 50px; height: 20px;" type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
	<input style="width: 50px; height: 20px;" type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
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		Other			
		Total Apprentice Rate			

Classification Description	Apprentice % of Base Rate		Straight Hourly	Time & one half	Double Time
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		Vacation			
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	<input style="width: 50px; height: 20px;" type="text"/>				
		Health & Welfare			
		Vacation			
		Pension			
		Training			
		Other			
		Total Apprentice Rate			