**IDENTIFICATION OF CONTRACTORS**

* To be completed by the Prime Contractor
* Submission of this form along with the Contractor/Subcontractor Certification form email to [prevwage@hennepin.us](mailto:prevwage@hennepin.us)

(The email Subject line to include Company Name and Hennepin County Contract Number)

|  |  |  |  |
| --- | --- | --- | --- |
| HENNEPIN COUNTY CONTRACT # | CONTRACT TITLE | DATE FOR WEEK ENDING | PAYROLL # |
| GENERAL/PRIME  SUB-CONTRACTOR | COMPANY NAME | PHONE NUMBER | MNDOLI LICENSE # |
| COMPANY ADDRESS | | EMAIL | |
| TYPE OF WORK (i.e. Construction, Service/Maintenance, Janitorial/Cleaning, Transportation, etc.) | | | |

Please identify all subcontractors you intend to utilize on this project. Update monthly as to additions, deletions or any other changes. If subcontractors are found working onsite who are not included on this form, it is considered a violation of the prevailing wage requirements and may subject the contractor to remedies of the County expressed in the contract documents.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name**  **Contact Person** | **Nature of Work** | **Estimated**  **Start**  **Date** | **Estimated**  **Completion**  **Date** | **Contract**  **Amount** |
| PRIME: |  |  |  |  |
| SUBS: |  |  |  |  |
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