CITY OF HARTFORD WAGE CERTIFICATION FORM

l,	of	
Officer, Owner, Authorized Rep.	Company	Name
do hereby certify that the		
	Company Name	
	Street	
	City	
and all of its subcontractors will pay all wo	rkers on the	
Project Name	e and Number	
Street and Ci	ty	
the following wages as required for such p	roject (a copy of the rates	which is attached hereto):
State of Connecticut Prevailing wage rate	tes	
Federal Prevailing wage rates		
City of Hartford Living wage rates		
	Signatu	ſe
Subscribed and sworn to before me this	day	of, 20

Notary Public