Instructions for the WD-10
Davis-Bacon Wage Survey
Report of Construction Contractor's Wage Rates

Information about Davis-Bacon Wage Surveys, including dates of current and future surveys, may be obtained at the Davis-Bacon and related Acts (DBRA) web site at www. dol.gov/esa/programs/dbra/index.htm.

INSTRUCTIONS

- Use blue or black ink.
- Hand-print letters/numbers.
- Use one block for each letter, number, period, or space. If you use a typewriter or printer to complete this form, ignore the block spacing.
- Fill in circles completely.
- Use one WD-10 form for each construction project.

This form is machine readable, and should not be copied. For additional forms, please contact (1-866-487-9243), OR fill out and submit your forms electronically using the following site on the World Wide Web: https://www.dol-esa.gov/wd10.

FORM SIDE 1

Sections 1 and 2 — Contractor and Submitter Information

- 1 Fill in with information about your company.
- 2 Fill in with information about the submitter of the form.

Sections 3, 4, 5, and 6 — Project Information

- 3 Fill in information about the construction project your company worked on and the project's location and description.
- 4 Fill in one circle to identify if the project was subject to a federal or state wage determination.
- 5 Fill in one circle to identify yourself as either the general/prime contractor or a subcontractor.
- 5A Indicate if you had no subcontractors, OR if you did, then indicate whether you are enclosing a list of subcontractors along with the WD-10 form, or if you submitted a list earlier.
- 5B If you were the prime/general contractor, provide the date any work began on this project, the date the project ended (indicate if actual or estimated date), and the total project value.
- 5C If you were a subcontractor, provide the date your work started and ended (indicate if actual or estimated date) and the subcontract value.
- 6 Mark the type of construction project your company worked on. If none of the construction types matches your project, fill in the circle next to OTHER, and indicate the type of construction in the blocks. If you selected APARTMENT BUILDING, NURSING/ASSISTED LIVING FACILITIES, or RESIDENTIAL, indicate the number of stories, and fill in the circle if there was a kitchen and/or a bath in each unit.

FORM SIDE 2

Section 7 — Classification and Fringe Benefits

- If you only supplied materials, and no employees worked on the project, then fill in the circle marked "Only Supplied Materials," skip the rest of section 7, and sign and date the form.
- The remainder of section 7 requests multiple types of information per classification. Fill in each item as defined and described as follows:

  - CLASSIFICATION(S) are the position titles of jobs within your company (e.g., Carpenter, Electrician, Laborer, Crane Operator, etc.). Fill in one classification per line. If the workers in a classification are paid more than one hourly rate or different fringe benefits, please list them on separate lines. If more than 6 classifications and wage rates need to be listed for a project, report the additional classifications and wage rates on a new WD-10. On the new WD-10 fill out only Sections 1, 3, and 7.
    GUAM SURVEY RESPONDENTS ONLY:
    • **LIST H2B VISA WORKERS SEPARATELY FROM OTHER REPORTED WORKERS**
    • **IDENTIFY H2B WORKERS BY AN "H2" AFTER THE CLASSIFICATION TITLE**
    Example:
    H2B/Visa Carpenter   Non-H2B Carpenter

    CLASSIFICATION   CLASSIFICATION
    Carpenter H2   Carpenter

- TYPE OF WORK PERFORMED – Explain the type of work that each classification performs (e.g., Laborer: landscape, unskilled, pipelayer; Carpenter: carpentry, drywall; Operator: backhoe, etc.).

Examples:

CLASSIFICATION	CLASSIFICATION	CLASSIFICATION
L A B O R E R	C A R P E N T E R	O P E R A T O R
TYPE OF WORK PERFORMED	TYPE OF WORK PERFORMED	TYPE OF WORK PERFORMED
U N S K I L L E D	C A R P E N T R Y & D R Y W A L L	B A C K H O E

Section 7 — Classification and Fringe Benefits (continued)

- PEAK WEEK ENDING DATE is the week you had the largest number of employees in a classification.
- NUMBER OF EMPLOYEES is the largest number of employees working in this classification on this project.
- HOURLY RATE is the dollar amount you paid employees per hour working in this classification.
- CBA – If the employee is paid under a Collective Bargaining Agreement, fill in the circle that represents Yes, otherwise fill in the circle that represents No.
- FRINGE BENEFITS are paid in addition to the hourly rate. Report only the costs or contributions incurred by your company, NOT the employees. Do not include costs paid by the employer that are required by either Federal, State, or local law such as worker's compensation or unemployment insurance. Fill out the information under each fringe benefit that applies.
    - HEALTH & WELFARE – Medical or hospital care, or insurance to provide such care, life insurance, long- or short-term disability, sickness, or accident insurance.
    - PENSION (401K, ETC.) – Retirement/401K, defined contribution plans (including savings and thrift, deferred profit sharing and money purchase pension), annuity cost, or cost of insurance to provide such a benefit.
    - APPRENTICE TRAINING – Defrayment of the cost of apprenticeship or similar training programs.
    - VACATION & HOLIDAY – The payment of compensation for holidays and vacation.
    - ADDITIONAL FRINGE – If you are not sure of the category of the fringe benefit(s), enter the rate information in the column, and specify the fringe type in the "Description of Any Additional Fringe" field at the bottom of the form.

Fringe benefits can be paid by a straight dollar amount, or by a percentage of the basic hourly rate. Indicate the cost or contribution your company paid to this classification during the peak week of this project.

If the fringe benefits were paid by a straight dollar amount: Dollars ($) per Employee (EMP.) per

- Mark the circle before $ per EMP. per
- Fill in the dollar value in the blocks provided.

    Include the decimal position when you fill in the dollar amount.

    Do not include the $ sign. (Example: 1.50 for one dollar and fifty cents.)

- Indicate how often this dollar value was paid in the block following $ per EMP. per with the values as follows: H for hourly, D for daily, W for weekly, M for monthly, and A for annually/yearly.

Example — If an employee was provided a straight dollar amount of $1.50 on a weekly basis for health and welfare:
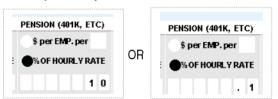

If the fringe benefits were paid by a percentage of the basic hourly rate: Percentage (%)

- Mark the circle before % OF HOURLY RATE.
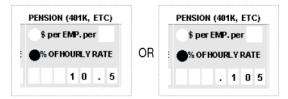- Fill in the percentage values (based on the basic hourly rate) in the blocks.

    Do not include the % sign.

    Include a decimal position only if necessary.

    Example — For 10%, print "10" or ".1" in the blocks. If an employee was provided 10% of the hourly rate for pension contribution:

Use a "5" to indicate a half of a percent.
Example — For 10½%, print "10.5" or ".105" in the blocks:

Item 8 — Comments or Remarks and Signature

- COMMENTS OR REMARKS — Provide comments or additional information.
- SIGNATURE — Submitter must sign and date the form.

KEY TERMS

➢ Apprentice – A person employed and registered in a bonafide apprenticeship program. (If these Apprentices/Trainees are in a formal program approved by the U.S. Dept. of Labor, Bureau of Apprenticeship and Training (BAT), or a state apprenticeship agency recognized by BAT, then information regarding wages and fringe benefits need not be provided.)

➢ Helper – A person that helps or assists and whose duties are distinct from the journey level class and laborer.

➢ General/Prime Contractor – The principal contractor on the project.

➢ Subcontractor – A contractor working on the project responsible for specific work but not the overall project. You are not a subcontractor for purposes of this survey if you supplied only materials.

➢ Subcontractor List – A machine-readable form for reporting the names and addresses of any subcontractors used by the contractor/subcontractor on the project being reported.

➢ Trainee – A person registered in a construction occupation program.