

Agency Name: _____	Agency Type: [e.g., CDBG, PHA, TDHE/IHA] _____	State: _____	DBLS Agency ID #: (HUD Use Only) _____
Period Covered: Check One and Enter Year			
<input type="checkbox"/> Period 1: October 1, _____ to March 31, _____		<input type="checkbox"/> Period 2: April 1, _____ to September 30, _____	
Agency Contact Person: _____	Agency Contact Phone/E-mail: _____		

PART I – NEW CONTRACTING ACTIVITY
Pertains ONLY to contracts awarded during the reporting period.

- Number of prime contracts subject to the Davis-Bacon and Related Acts (DBRA) and/or the Contract Work Hours and Safety Standards Act (CWHSSA) awarded this period _____
Note: Do not include contracts included in previous semi-annual reports
- Total dollar amount of prime contracts reported in item 1 above _____

PART II - ENFORCEMENT ACTIVITY

Identify all enforcement activity that occurred within this reporting period. Enforcement activity applies to newly awarded contracts listed in Part I and any existing contracts subject to DBRA and/or CWHSSA not previously reported.

- Number of contractors against whom **complaints** were received: _____
- Number of investigations completed: _____
- Number of contractors found in violation: _____
- Amount of back wages found due:

	DBRA	_____
	CWHSSA	_____
- Amount of back wages paid:

	DBRA	_____
	CWHSSA	_____
- Total number of employees paid wage restitution under the DBRA and/or CWHSSA: _____
- Total amount of liquidated damages assessed: _____