



Subcontractor: \_\_\_\_\_

Job: \_\_\_\_\_

Please list your wage rate breakdown in the space below for the above referenced job. This information is required by the owner to aid in their review of change order proposals. WE WILL BE UNABLE TO PROCESS ANY CHANGE ORDERS THAT INCLUDE YOUR WORK UNTIL WE HAVE THIS INFORMATION. If you have any questions, please contact our office.

DATE \_\_\_\_\_

TRADE \_\_\_\_\_

TOTAL BASE RATE \$ \_\_\_\_\_

FRINGE PACKAGE \$ \_\_\_\_\_

FED. UNEMPLOYMENT TAX \$ \_\_\_\_\_

FICA \$ \_\_\_\_\_

MEDICARE \$ \_\_\_\_\_

STATE UNEMPLOYMENT \$ \_\_\_\_\_

WORKERS COMPENSATION \$ \_\_\_\_\_

**TOTAL HOURLY RATE** \$ \_\_\_\_\_

WE MUST HAVE ONE OF THESE FORMS FILLED OUT FOR EACH TRADE YOU MAY HAVE.