



CONTRACTOR ACKNOWLEDGEMENT CERTIFICATION (FOR SUBCONTRACTOR APPROVAL)



Project Name & Number:	
Prime Contractor:	
Subcontractor:	
Lower-Tier Sub (if applicable):	

This **is not** a Federal-aid construction project (Items 1 & 2 below must be checked only)

PRIME CONTRACTOR CERTIFICATION: I hereby certify the below documentation (as checked) was included in, and made part of, the subcontractor agreement/contract entered with the Company named above.

1. [NHDOT Subcontracting Procedures](#) (Rev. December 26, 2023)
2. [NHDOT Standard Specification 109.09 Prompt Payments to Subcontractors](#)
3. [Required Contract Provisions for Federal-Aid Construction Contracts](#) (Form FHWA-1273 Rev. October 23, 2023)
4. Applicable Davis-Bacon wage rates from Contract Proposal
5. [Disadvantaged Business Enterprise \(DBE\) Policy and Program Requirements](#) (Standard Spec 103.06)
6. [41 CFR 60-4.2 and 41 CFR 60-4.3](#) (Applicable only to contracts or subcontracts of \$10,000 or more)

Prime's Agent: _____
Printed Name Signature Date

Subcontractor's Agent*: _____
Printed Name Signature Date

* For Lower-Tier Sub request only

SUBCONTRACTOR CERTIFICATION:

The documents selected above were made part of the subcontractor agreement. This Company understands the NHDOT subcontracting procedures and certifies it will properly obtain approval from the NHDOT before the start of work on site. This Company will also obtain NHDOT approval for any portion of work sublet to a lower-tier Subcontractor.

A Work Certificate and supporting documentation to affirm compliance with [NH RSA 228:4-b](#) is attached. This Company understands and acknowledges that no individual, owner, or officer who is excluded from Workers' Compensation coverage may work on site, without exception. All persons directly performing work on site must have Workers' Compensation Insurance coverage on file with the [New Hampshire Department of Labor](#).

Select one: No Yes, this company has excluded owners or members from its Workers' Compensation policy that are not authorized to directly perform work on a State Transportation Project per [RSA 228:4-b II](#).

If yes, list name(s): _____

This company is properly registered and active or good standing with the [NH Secretary of State's Office](#).

I hereby certify this company is in full compliance with [NH Employment Security](#) or out-of-state Company's equivalent home state department or agency. All workers are being correctly reported; any workers not reported are viewed as Independent Contractors by the NHDOT and require approval prior to working on site.

This company will comply with the [Required Contract Provisions Form FHWA-1273](#) and all other provisions incorporated by reference in the FHWA-1273 when participating in federally-aided contracts.

As an authorized official of this company, I hereby certify that this company will observe and comply with applicable Federal, State, and local laws, regulations, and orders per [NHDOT Standard Specification 107.01](#).

Company: _____ FEIN: _____

Subcontractor's Agent: _____
Or Lower-Tier's Agent when applicable Printed Name Signature Date