

BULLETIN BOARD

The Contractor is required to post a weatherproof and watertight bulletin board in a readily accessible area where employees gather to start work on the project site. The bulletin board must contain the following items:

<u>Yes</u>	<u>No</u>	
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| ___ | ___ | A. Poster-OFCCP-1420 "Equal Opportunity is the Law" |
| ___ | ___ | B. Poster-OFCCP-1420 "La Igualdad De Oportunidades De Empleo Es La Ley" |
| ___ | ___ | C. Poster-WH-1321 "Notice to Employees" Davis Bacon Wage Rate |
| ___ | ___ | D. Poster-FHWA-1022 "Notice Federal Aid Projects" |
| ___ | ___ | E. Poster-FHWA-1495 "Wage Rate Information" |
| ___ | ___ | F. Poster-FHWA-1495A "Informacion Sobre Escalas De Salrios" |
| ___ | ___ | G. Poster-OSHA-3165 "Job Safety and Health Protection" |
| ___ | ___ | H. Poster-OSHA-3167 "Sequirdad En El Trabajo Y Proteccion De La Salud" |
| ___ | ___ | I. Poster-WH-1088 "Your Rights Federal Minimum Wage" |
| ___ | ___ | J. Poster-WH-1088SP "Deprechos De Empleados" |
| ___ | ___ | K. Poster-WH-1284 "Notice to Workers with Disabilities Paid at Special Minimum Wages" |
| ___ | ___ | L. Poster-WH-1420 "Your Rights Under the Family and Medical Leave Act of 1993" |
| ___ | ___ | M. Poster-WH-1420SP "Sus Derechos bajo La Ley de Ausencia Familiar y Medica de 1993" |
| ___ | ___ | N. Poster-WH-1462 "Notice Employee Polygraph Protection Act" |
| ___ | ___ | O. Poster-OSHA-1926.5 "Emergency Telephone Numbers of Medical Facilities and Ambulance Services" |
| ___ | ___ | P. Poster-Whistle Blower "Know Your Rights Under The Recovery Act!" [ARRA funded (STIM) projects only] |
| ___ | ___ | Q. Poster-State Minimum Wage "Your Rights Under the Oklahoma Minimum Wage Act" (two posters) |
| ___ | ___ | R. Contractor's EEO Policy Statement |
| ___ | ___ | S. Letter Appointing the Contractor's EEO Officer for the Project |
| ___ | ___ | T. Letter Naming Contractor's EEO Officer and all Subcontractors EEO Officer(s) with Contact Information |
| ___ | ___ | U. Letter of Certification of Nonsegregated Facilities |
| ___ | ___ | V. Contractor's Training Program Information |
| ___ | ___ | W. Contractor's Procedure for Resolving Discrimination Complaints |
| ___ | ___ | X. Contractor's Designated Safety Officer |
| ___ | ___ | Y. Wage Scale from Project Contract |
| ___ | ___ | Z. ODEQ Authorization to Discharge Certificate with Emergency Contact Name and Phone Number |

Project Number: _____

Signature: _____

Title: _____

Date: _____