## MINNESOTA DEPARTMENT OF TRANSPORTATION MONTH-END TRUCKING REPORT STATEMENT OF COMPLIANCE

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REPORT #		STATE PROJECT NUMBER(S)	FEDERAL PROJECT NUMBER(S)	
3.				
CONTRACTOR'S NAME			CONTRACT NUMBER(S)	
ADDRESS (Street, City, State and Zip Code)			PROJECT LOCATION	
TELEPHONE NUMBER			PLEASE CHECK THE TYPE OF CONTRACTOR:	
			☐ PRIME ☐ SUBCONTRACTOR ☐ TRUCKING CO. ☐ BROKER	
_				
I,	I,			
-,	(Contractor	Representative)	(Title)	
1.	I pay or supervise the payment of all Multiple Truck Owners (MTOs), which includes Trucking Firms, Brokers, and/or Independent Truck			
	Owner Operators (ITOs) hired by the above listed contractor for this contract; that during			
	I paid	MTOs and/or ITOs to perform	m hauling activities for this contract. (Month) (Year)	
	(Number of Entities)			
2.	All MTOs and/or ITOs hired by the above listed Contractor to perform hauling activities for this contract are listed on the Month-End Trucking			
	Report and have been paid truck rental rates for all hours worked pursuant with the Minnesota Department of Labor and Industry's Truck Rental			
	•	•	with the contract provisions, Minnesota Statutes 177.41 – 177.44, and Minnesota	
		-	with the contract provisions, withincook statutes 1/7.41 – 1/7.44, and withincook	
2	Rules 5200.1000 – 5200.1120.			
3.	No rebate or deduction has or shall be made, either directly or indirectly, to or on behalf of the above listed Contractor from the full payment			
	owed, except permissible deductions established in Minnesota Rule 5200.1106.			
4.	All subcontractor agreements, contracts or purchase orders executed between the above listed Contractor and all MTOs and/or ITOs contain			
	language consiste	nt with the contract Labor Provisions, includir	ng Wage Decision(s) and the Truck Rental Rate decision incorporated into the	
	above referenced	contract.		
5.	All Certified Payroll Reports and Month-End Trucking Reports submitted by the subcontractors, MTOs and/or ITOs performing hauling			
	activitites for this contract shall be submitted in accordance with the Contract Labor Provisions.			
The willful falsification of any of the above statements may subject the Contractor to civil or criminal prosecution under federal and/or state				
law. See Minnesota Statutes 15C; 16B; 161.315, Subdivision 2; 177.43, Subdivision 5; 177.44, Subdivision 6; 609.63; or United States Code 18 U.S.C. 1001, 31 U.S.C. 231, CFR 5.12.				
		7		
NAI	ME AND TITLE (	OF CONTRACTOR REPRESENTATIVE (Pri	rint) SIGNATURE DATE	
As a representative of the contractor submitting the attached Month-End Trucking Report identified above, I hereby certify that this report is true,				
complete and accurate to the best of my knowledge.				
NAME AND TITLE OF PRIME CONTRACTOR (Print)		OF PRIME CONTRACTOR (Print)	SIGNATURE DATE	
1 1/1 1/1	111111	2 11 mily	Signature	
As a representative of the Prime Contractor, I have reviewed the attached forms and certify to the best of my knowledge that they accurately reflect				
operations of this company on this project and meet the contract requirements for this project.				

- \* Subcontractors / Trucking Firms / Brokers (as defined by Minnesota Rules 5200.1105 and 5200.1106 and Minnesota Statutes Sections 177.41 to 177.44), must submit this report, along with the Month-End Trucking Report to the **Prime Contractor** within **five working days** after the month ending date.
- \*\* The Prime Contractor must submit all trucking related reports to the Project Engineer within ten working days after the month ending date.

NOTE: All trucking entities (MTO or ITO) listed on this report must submit a Minnesota Department of Revenue IC-134 form to the Prime Contractor. In addition, the trucking entities must have a SWIFT Vendor ID. You may obtain a SWIFT Vendor ID at the following link: <a href="https://supplier.swift.mn.us/psp/fmssupap/SUPPLIER/ERP/h/?tab=SUP\_GUEST">https://supplier.swift.mn.us/psp/fmssupap/SUPPLIER/ERP/h/?tab=SUP\_GUEST</a>