



STATE UNIVERSITY OF NEW YORK STATE UNIVERSITY CONSTRUCTION FUND SUMMARY OF WAGE RATE CERTIFICATION(S)

INSTRUCTIONS: List each subcontractor and/or sub-subcontractor used on this Contract and their last day of work. When submitting your Final and End-of-Guarantee payment applications, attach this form (in triplicate) along with the latest Wage Rate Certifications, in triplicate, for your own firm and each subcontractor and/or sub-subcontractor.

NOTE: Last day of work must be within the effective dates of the latest Prevailing Rate Schedule.

CONTRACTOR			CAMPUS		
SUCF NO.	CONTRACT NO.	CONTRACT NO.		PROJECT TITLE	
	1	,			
SUBCONTRACTOR OR SUB- SUBCONTRACTOR		LAST DAY OF WORK		EFFECTIVE DATES OF LATEST PREVAILING RATE SCHEDULE*	
*See top left of DOL Pre	evailing Rate Schedule for	effective (date range.		
The foregoing is a true of completion.	and accurate listing of all	subcont	tractors and sub-subc	contractors employed on this Contract to date	
			Ву		
Legal name of person,	partnership or corpora	tion	· ·	Signature	
Name, Title					
Address (Street, City)	(State, Zip Code)				

CF-C7A Revised March 2021



