

Engineer's Payroll Check Sheet

Return to: Civil Rights Bureau
MT Dept of Transportation
2701 Prospect Avenue
Helena, MT 59620

Contract Number: Click here to enter text.
Project Number: Click here to enter text.
Designation: Click here to enter text.
District: Choose an item.
Date: Click here to enter a date.
Prime or Sub Contractor: Click here to enter text.

EPM: Click here to enter text.
Payroll Number: Click here to enter text.
Payroll Period: From: Click here to enter a date. To: Click here to enter a date.
Zone: Choose an item.

- A. Check Bulletin board each month
- B. Notify prime contractor of subcontractor payroll problems
- C. Spot check interviews will be conducted monthly. Attach corresponding payroll and submit to CRB.
- D. Payroll checklist

	Yes	No
1. Does the payroll indicate project number and payroll period covered?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are full names and an identifying employee number shown?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are workers properly classified and codes indicated that correspond to the contract? Submit conversion codes if needed.	<input type="checkbox"/>	<input type="checkbox"/>
4. Are wages, gross pay and overtime paid at the correct rate?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are the deductions shown allowable and/or authorized?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have apprenticeship papers been provided, if needed?	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the Statement of Compliance attached to the payroll?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are benefits certified as "bona fide" and the plan listed under the remarks?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has a supplemental payroll been requested for this period?	<input type="checkbox"/>	<input type="checkbox"/>
10. Employee deduction authorizations have been provided? (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
11. Union Collective Bargaining Agreement has been provided? (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
12. Addresses for approved fringe benefit plans have been provided? (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>

Under no circumstances should any payroll be returned to a contractor for correction. Any correction necessary must be on a supplemental payroll. This check sheet should be filled out and attached to the front of the payroll being submitted to the Civil Rights Bureau, with one payroll check sheet per payroll.

Additional comments:

Click here to enter text.

Payroll checked by: Click here to enter text.