NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY
Affirmative Action & Prevailing Wage
Completion Certificate

RECIPIENT OF AUTHORITY FINANCIAL ASSISTANCE COMPANY NAME *(Legal Name of Recipient of NJEDA Financial Assistance)*

PROJECT NAME and LOCATION *(include the Facility Name, Street Address, City and Zip Code of where construction was undertaken)*

CONSTRUCTION COMPLETION DATE	NJ COUNTY *(Project Location)*	AAPWR NUMBER

Completion Certificate to be completed and signed by the Recipient and the General Contractor and submitted to NJEDA Labor Compliance Department:

Instructions:
When the project is complete, complete the document below and email it to your assigned NJEDA Compliance Officer with a list of all sub-contractors(all tiers) who worked on this project.

I/We, the undersigned, certify to the New Jersey Economic Development Authority as follows:

The construction of the above project is complete.

All workers employed in construction of the Project have been paid at a rate not less than the NJ Prevailing Wage rate unless specifically exmpted by N.J.A.C. 19:30-4.2 (a) or (b), or N.J.A.C. 19:30-4.4 if appplicable; In making this certification I have relied on payroll certifications prepared and submitted by the general contractor, prime contractor, all subcontractors including all lower-tier subcontractors.

We have made good faith efforts to achieve minority and women workforce participation goals and submitted all reports and certificates required by the Authority.

RECIPIENT OF AUTHORITY FINANCIAL ASSISTANCE

Date (mm/dd/yyyy)

Authorized Rep. Phone Number

Signature of Authorized Representative - Recipient of NJEDA Financial Assistance

Print Authorized Representative Name and Title

Print Company's Legal Name - Recipient of NJEDA Financial Assistance

Company's Street Address

City, State and Zip Code

GENERAL CONTRACTOR/ PRIME CONTRACTOR/ CONSTRUCTION MANAGER

Date (mm/dd/yyyy)

Authorized Rep. Phone Number

Signature of Authorized Representative - General Contractor/Prime/ Construction Manager

Print Authorized Representative Name and Title

Print Company's Legal Name

Company's Street Address

City, State and Zip Code

I/We, the authorized representative of the Recipient of NJEDA Financial Assistance and the Construction Manager or General Contractor, certify that I/We have no knowledge or information which would cause me/us to believe that any facts, information or representations made here in are false or misleading.