

SECTION 905 -- PROPOSAL (CONTINUED)

I (We) hereby certify by digital signature and electronic submission via Bid Express of the Section 905 proposal below, that all certifications, disclosures and affidavits incorporated herein are deemed to be duly executed in the aggregate, fully enforceable and binding upon delivery of the bid proposal. I (We) further acknowledge that this certification shall not extend to the bid bond or alternate security which must be separately executed for the benefit of the Commission. This signature does not cure deficiencies in any required certifications, disclosures and/or affidavits. I (We) also acknowledge the right of the Commission to require full and final execution on any certification, disclosure or affidavit contained in the proposal at the Commission's election upon award. Failure to so execute at the Commission's request within the time allowed in the Standard Specifications for execution of all contract documents will result in forfeiture of the bid bond or alternate security.

Bidder acknowledges receipt of and has added to and made a part of the proposal and contract documents the following addendum (addenda):

ADDENDUM NO. <u> 1 </u>	DATED <u> 5/14/2026 </u>	ADDENDUM NO. <u> </u>	DATED <u> </u>
ADDENDUM NO. <u> 2 </u>	DATED <u> 5/20/2026 </u>	ADDENDUM NO. <u> </u>	DATED <u> </u>
ADDENDUM NO. <u> </u>	DATED <u> </u>	ADDENDUM NO. <u> </u>	DATED <u> </u>

Number	Description
1	Revised Table of Contents; Added NTB No. 8107; Revised Bid Items; Amendment EBSx Download Required.
2	Revised Wage Rates; Amendment EBSx Download Required.

TOTAL ADDENDA: 2
(Must agree with total addenda issued prior to opening of bids)

Respectfully Submitted,

DATE _____

Contractor

BY _____
Signature

TITLE _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____

FAX _____

E-MAIL _____

(To be filled in if a corporation)

Our corporation is chartered under the Laws of the State of _____ and the names, titles and business addresses of the executives are as follows:

_____ President	_____ Address
_____ Secretary	_____ Address
_____ Treasurer	_____ Address

The following is my (our) itemized proposal.

STP-0022-01(094)/ 109465301000 & SP-0022-01(094)/ 109466301000
Jones County(ies)

Revised 01/26/2016

State: Mississippi

Construction Types: Highway

Counties: Mississippi Counties of Jones

Modification Number	Publication Date
1	01/23/2026
2	05/18/2026

ELEC0917-006 12/01/2025

	Rates	Fringes
ELECTRICIAN.....	\$ 33.30	11.63

SUMS2010-017 08/04/2014

	Rates	Fringes
TRUCK DRIVER: SEMI/TRAILER TRUCK.....	\$ 12.50	0.00
TRUCK DRIVER: DUMP (ALL AXLES).....	\$ 11.00	0.00
TRUCK DRIVER: WATER TRUCK.....	\$ 9.63	0.00
TRUCK DRIVER: OFF THE ROAD TRUCK.....	\$ 12.31	0.00
TRUCK DRIVER: MECHANIC.....	\$ 12.30	0.00
TRUCK DRIVER: LOWBOY TRUCK.....	\$ 12.59	0.00
TRUCK DRIVER: FLATBED TRUCK.....	\$ 13.29	0.00
SURVEYOR (STAKING, MARKING AND BRUSH CLEARING).....	\$ 12.34	0.00
OPERATOR: TRENCHER.....	\$ 13.75	0.00
OPERATOR: TRACTOR.....	\$ 11.02	0.00
OPERATOR: SCRAPER.....	\$ 12.63	0.00
OPERATOR: ROLLER (ALL TYPES).....	\$ 12.24	0.00
OPERATOR: PILEDRIVER.....	\$ 15.13	0.00
OPERATOR: PAVER (ASPHALT, AGGREGATE, AND CONCRETE).....	\$ 11.69	0.00
OPERATOR: OILER.....	\$ 13.05	0.00
OPERATOR: MIXER.....	\$ 12.42	0.00
OPERATOR: MILLING MACHINE.....	\$ 16.59	0.00
OPERATOR: MECHANIC.....	\$ 15.41	0.00
OPERATOR: LOADER.....	\$ 14.31	0.00
OPERATOR: GRADER/BLADE.....	\$ 16.89	0.00
OPERATOR: DRILL.....	\$ 19.22	0.00
OPERATOR: DISTRIBUTOR.....	\$ 12.00	0.00
OPERATOR: CRANE.....	\$ 18.35	0.00
OPERATOR: CONCRETE SAW.....	\$ 14.32	0.00
OPERATOR: BULLDOZER.....	\$ 13.16	0.00
OPERATOR: BROOM/SWEEPER.....	\$ 10.75	0.00
OPERATOR: BACKHOE/EXCAVATOR/TRACKHOE.....	\$ 14.29	0.00
OPERATOR: ASPHALT SPREADER.....	\$ 15.33	0.00
LABORER: LABORER-CONES/ BARRICADES/BARRELS - SETTER/MOVER/SWEEPER.....	\$ 12.02	0.00
LABORER: PIPELAYER.....	\$ 12.27	0.00
LABORER: MASON TENDER - CEMENT/CONCRETE.....	\$ 11.10	0.00
LABORER: GRADE CHECKER.....	\$ 12.41	0.00

LABORER: FLAGGER.....	\$ 10.00	0.00
LABORER: COMMON OR GENERAL, INCLUDING ASPHALT RAKING, SHOVELING, SPREADING.....	\$ 10.12	0.00
IRONWORKER, REINFORCING.....	\$ 15.28	0.00
INSTALLER - SIGN.....	\$ 12.01	0.00
INSTALLER - GUARDRAIL.....	\$ 11.68	0.00
HIGHWAY/PARKING LOT STRIPING: TRUCK DRIVER (LINE STRIPING TRUCK).....	\$ 12.26	0.00
CEMENT MASON/CONCRETE FINISHER.....	\$ 12.47	0.78
CARPENTER, EXCLUDES FORM WORK.....	\$ 14.21	0.00
CARPENTER (FORM WORK ONLY).....	\$ 12.66	0.60

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

=====
Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours they work, up to 56 hours of paid sick leave each year. Employees must be permitted to use paid sick leave for their own illness, injury or other health-related needs, including preventive care; to assist a family member (or person who is like family to the employee) who is ill, injured, or has other health-related needs, including preventive care; or for reasons resulting from, or to assist a family member (or person who is like family to the employee) who is a victim of, domestic violence, sexual assault, or stalking. Additional information on contractor requirements and worker protections under the EO is available at <https://www.dol.gov/agencies/whd/government-contracts>.

Note: Executive Order 13658 generally applies to contracts subject to the Davis-Bacon Act that were awarded on or between January 1, 2015 and January 29, 2022, and that have not been renewed or extended on or after January 30, 2022. Executive Order 13658 does not apply to contracts subject only to the Davis-Bacon Related Acts regardless of when they were awarded. If a contract is subject to Executive Order 13658, the contractor must pay all covered workers at least \$13.65 per hour (or the applicable wage rate listed on this wage determination, if it is higher) for all hours spent performing on the contract from May 11, 2026, through December 31, 2026. The applicable Executive Order minimum wage rate will be adjusted annually. Additional information on contractor requirements and worker protections under Executive Order 13658 is available at www.dol.gov/whd/govcontracts.

Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (iii)).

The body of each wage determination lists the classifications and wage rates that have been found to be prevailing for the type(s) of construction and geographic area covered by the wage determination. The classifications are listed in alphabetical order under rate identifiers indicating whether the particular rate is a union rate (current union negotiated rate), a survey rate, a weighted union average rate, a state adopted rate, or a supplemental classification rate.

Union Rate Identifiers

A four-letter identifier beginning with characters other than **SU**, **UAVG**, **SA**, or **SC** denotes that a union rate was prevailing for that classification in the survey. Example: PLUM0198-005 07/01/2024. PLUM is an identifier of the union whose collectively bargained rate prevailed in the survey for this classification, which in this example would be Plumbers. 0198 indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. The date, 07/01/2024 in the example, is the effective date of the most current negotiated rate.

Union prevailing wage rates are updated to reflect all changes over time that are reported to WHD in the rates in the collective bargaining agreement (CBA) governing the classification.

Union Average Rate Identifiers

The UAVG identifier indicates that no single rate prevailed for those classifications, but that 100% of the data reported for the classifications reflected union rates. EXAMPLE: UAVG-OH-0010 01/01/2024. UAVG indicates that the rate is a weighted union average rate. OH indicates the State of Ohio. The next number, 0010 in the example, is an internal number used in producing the wage determination. The date, 01/01/2024 in the example, indicates the date the wage determination was updated to reflect the most current union average rate.

A UAVG rate will be updated once a year, usually in January, to reflect a weighted average of the current rates in the collective bargaining agreements on which the rate is based.

Survey Rate Identifiers

The **SU** identifier indicates that either a single non-union rate prevailed (as defined in 29 CFR 1.2) for this classification in the survey or that the rate was derived by computing a weighted average rate based on all the rates reported in the survey for that classification. As a weighted average rate includes all rates reported in the survey, it may include both union and non-union rates. Example: SUFL2022-007 6/27/2024. SU indicates the rate is a single non-union prevailing rate or a weighted average of survey data for that classification. FL indicates the State of Florida. 2022 is the year of the survey on which these classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. The date, 6/27/2024 in the example, indicates the survey completion date for the classifications and rates under that identifier.

SU wage rates typically remain in effect until a new survey is conducted. However, the Wage and Hour Division (WHD) has the discretion to update such rates under 29 CFR 1.6(c)(1).

State Adopted Rate Identifiers

The **SA** identifier indicates that the classifications and prevailing wage rates set by a state (or local) government were adopted under 29 C.F.R 1.3(g)-(h). Example: SAME2023-007 01/03/2024. SA reflects that the rates are state adopted. ME refers to the State of Maine. 2023 is the year during which the

state completed the survey on which the listed classifications and rates are based. The next number, 007 in the example, is an internal number used in producing the wage determination. The date, 01/03/2024 in the example, reflects the date on which the classifications and rates under the **SA** identifier took effect under state law in the state from which the rates were adopted.

WAGE DETERMINATION APPEALS PROCESS

1) Has there been an initial decision in the matter? This can be:

- a) a survey underlying a wage determination
- b) an existing published wage determination
- c) an initial WHD letter setting forth a position on a wage determination matter
- d) an initial conformance (additional classification and rate) determination

On survey related matters, initial contact, including requests for summaries of surveys, should be directed to the WHD Branch of Wage Surveys. Requests can be submitted via email to davisbaconinfo@dol.gov or by mail to:

Branch of Wage Surveys
Wage and Hour Division
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

Regarding any other wage determination matter such as conformance decisions, requests for initial decisions should be directed to the WHD Branch of Construction Wage Determinations. Requests can be submitted via email to BCWD-Office@dol.gov or by mail to:

Branch of Construction Wage Determinations
Wage and Hour Division
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

2) If an initial decision has been issued, then any interested party (those affected by the action) that disagrees with the decision can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Requests for review and reconsideration can be submitted via email to dba.reconsideration@dol.gov or by mail to:

Wage and Hour Administrator
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, DC 20210.

=====
END OF GENERAL DECISION

..