

EXHIBIT 6-B

REQUEST FOR WAGE DETERMINATION

(Date)

Montana Department of Commerce
Community Development Division
CDBG Program
301 S. Park
P.O. Box 200523
Helena, MT 59620-0523

The (... name of grantee: City, Town or County of _____) is preparing to go to bid for a contract involving FY 200__ Montana Community Development Block Grant (CDBG) funds. The project involves:

- (***brief description of activities***);
- (***estimated amount***); and
- (***projected date of bid opening***).

Please send us a copy of the current wage determination that will apply to this project.

Fifteen days prior to the bid opening I will contact you to confirm that the wage rate determination you have sent in response to this request is still current.

Sincerely,

(signature)

Typed Name , Labor Standards Officer
Mailing Address
Telephone and FAX Number
E-mail Address