**LABOR STANDARDS OFFICER DESIGNEE**

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| UNIT OF GENERAL LOCAL GOVERNMENT (UGLG) (i.e. CDBG GRANTEE): |
|  |
| DOA-DEHCR GRANT AGREEMENT #: |
|  |

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| --- | --- |
| LABOR STANDARDS OFFICER (LSO)  FULL NAME: |  |
| LSO JOB/POSITION TITLE: |  |
| LSO COMPANY/ ORGANIZATION/ FIRM: |  |
| STREET ADDRESS: |  |
| CITY, STATE, ZIP: |  |
| PHONE NUMBER: |  |
| E-MAIL ADDRESS: |  |

***Email*** *this form to the assigned DEHCR Project Representative or to* [*DOACDBG@wisconsin.gov*](mailto:DOACDBG@wisconsin.gov) *upon designating the LSO and prior to construction starting. If no LSO Designee form is received, the UGLG Grant Administrator is presumed to be the LSO for the project.*

*Retain the completed original document in the UGLG’s CDBG project file.*