



ARIZONA DEPARTMENT OF TRANSPORTATION  
RECORD OF CONTRACTOR EMPLOYEE INTERVIEW

Project/TRACS #: \_\_\_\_\_  
Prime Contractor: \_\_\_\_\_  
ADOT Inspector's Name: \_\_\_\_\_

Interview Date: \_\_\_\_\_  
Time: \_\_\_\_\_

**Questions for the Employee**

Name: \_\_\_\_\_  
Employer: \_\_\_\_\_

Does your paycheck come from that employer? Yes No

What is your working craft and classification? \_\_\_\_\_

Do you work in more than one classification? Yes No

Are you paid a different hourly rate for each classification? Yes No

Are you an apprentice or trainee? Yes No

What is your hourly wage on this project? \_\_\_\_\_

What is your regular hourly wage? \_\_\_\_\_

Does your employer offer benefits? Yes No Vacation/Holiday Health Insurance Pension

Does your employer pay for some or all of your benefits? Yes No

Do you work more than 40 hours in a work week? Yes No

Are you paid time and one-half for all overtime hours worked? Yes No

Are you paid at least once a week? Yes No

Do you know where the wage rates for this job are posted? Yes No

Do you believe your employer is paying you the correct wage rate for the work you are performing? Yes No

If not, what hourly rate do you believe you should be paid? \_\_\_\_\_

Would you like to make any comments or do you have any concerns? \_\_\_\_\_

**Inspector's Comments** *(At the time of the employee interview record the following)*

Work being performed by employee: \_\_\_\_\_

Type of tools or equipment used by employee: \_\_\_\_\_

Make and model of tools or equipment used by employee *(if applicable)*: \_\_\_\_\_

Notes: \_\_\_\_\_

<b>Payroll Review</b>		Certified Payroll Report #:		Week End Date:	
Classification Required per Wage Decision:					
Base Rate:		Fringe Rate:		= Total Pay:	
Classification shown on Payroll:					
Hourly Rate:		Hourly Cash Fringe:		Hourly Plan Fringe:	
				=Total Pay:	
Verification of Fringe Benefit Plan:		Health & Welfare:		Pension:	
		Vacation & Holiday:		All Other:	
				Training:	
Back Wages Owed?		Yes No		If yes, are back wages submitted and uploaded to LCP?	
				Yes No	
Interview in LCPtracker?		Yes No		Conformance Request Required?	
				Yes No	
Date Original to Field Reports:		Date Uploaded to LCP Tracker:			
Date Verified:		Verified by:			