

**Attachment E**  
**Wage Theft Certification**

Wage Theft Prevention – Responsible Bidder Criteria

*Prior to awarding a contract, agencies are required to determine that a bidder is a ‘responsible bidder.’ See RCW 39.26.160(2) & (4). Pursuant to legislative enactment in 2017, the responsible bidder criteria include a contractor certification that the contractor has not willfully violated Washington’s wage laws. See Chap. 258, 2017 Laws (enacting SSB 5301).*

Procurement Number: 23-1700

I hereby certify, on behalf of the organization/organizations identified below, as follows (check one):

NO WAGE VIOLATIONS. This organization and, in cases of joint proposals, the members of our coalition, has NOT been determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction to have willfully violated, as defined in [RCW 49.48.082](#), any provision of RCW chapters [49.46](#), [49.48](#), or [49.52](#) within three (3) years prior to the date of the above-referenced procurement solicitation date.

OR

VIOLATIONS OF WAGE LAWS. This organization and, in cases of joint proposals, the members of our coalition, has been determined by a final and binding citation and notice of assessment issued by the Washington Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction to have willfully violated, as defined in [RCW 49.48.082](#), a provision of RCW chapters [49.46](#), [49.48](#), or [49.52](#) within three (3) years prior to the date of the above-referenced procurement solicitation date.

I hereby certify, under penalty of perjury under the laws of the State of Washington, that the certifications herein are true and correct and that I am authorized to make these certifications on behalf of the firm listed herein.

ORGANIZATION NAME: \_\_\_\_\_

Name of Bidder – Print full legal entity name of organization

By: \_\_\_\_\_  
Signature of authorized person

\_\_\_\_\_  
Print Name of person making certifications for firm

Title: \_\_\_\_\_  
Title of person signing certificate

Place: \_\_\_\_\_  
Print city and state where signed

Date: \_\_\_\_\_