NEVADA DEPARTMENT OF TRANSPORTATION

Request	for	Waiver	
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Contract No.:Contractor/Subcontractor: Contact: License Number: Phone:Fax: Phone: Fax: Phone: </th <th>For C</th> <th>ompliance with the Nevada Apprenticeship Utilization Act, 2019</th>	For C	ompliance with the Nevada Apprenticeship Utilization Act, 2019
Phone: Fax: e-mail:	Contract No.:	Contractor/Subcontractor:
	Contact:	License Number:
No waivers needed for this contractor/subcontractor in any crafts/trades.	Phone:	Fax: e-mail:
	☐ No waivers needed to be a second to be a seco	for this contractor/subcontractor in any crafts/trades.
Waiver needed for the following craft(s)/trade(s)	Waiver needed for	or the following craft(s)/trade(s)
as there are no apprentices available from an Apprenticeship Program registered by the Nevada State Apprenticeship Council within the jurisdiction where the public work is to be completed. Please describe why an Apprentice is not available or cannot be provided:	Apprenticeship Cour	ncil within the jurisdiction where the public work is to be completed. Please describe
Waiver needed for the following craft(s)/trade(s)	Waiver needed f	or the following craft(s)/trade(s)
as the contractor/subcontractor listed above requested Apprentices from a registered Apprenticeship Program and the request has been denied or not approved within 5 business days. Please describe why an Apprentice is not available or cannot be provided:	Program and the rec	quest has been denied or not approved within 5 business days. Please describe s not available or cannot be provided:
Waiver needed for the following craft(s)/trade(s)	Waiver needed f	or the following craft(s)/trade(s)
as the contractor/subcontractor is required to perform uniquely complex or hazardous tasks on the project as described below, that require the skill and expertise of a journeyman:		
Please attach all additional documentation/evidence needed to support the request for waiver.	Please attach all addition	onal documentation/evidence needed to support the request for waiver.
I affirm I am fully authorized to sign on behalf of the contractor/subcontractor listed above, and that the information provided is true and correct to the best of my knowledge.		
Signed:Date:	Signed:	Date:
Name and Title:	Name and Title:	

Nevada Department of Transportation Contract Compliance Office 1263 South Stewart Street Carson City, NV 89712