

**REQUEST TO UTILIZE SERVICE PROVIDER (RTUSP)  
for non-bid item work, excluding trucking**

TO: \_\_\_\_\_, R.E. CONTRACT NO.: \_\_\_\_\_

PRIME CONTRACTOR: \_\_\_\_\_

(If Applicable) SUBCONTRACTOR: \_\_\_\_\_

(If Applicable) 2<sup>nd</sup> Tier SUBCONTRACTOR: \_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_ (Print Name/Title) \_\_\_\_\_ (Company)

1) Service Provider: \_\_\_\_\_

2) (If Applicable) Service Provider's Contr. Lic. No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

3) Service Provider's NV Business Lic. No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

4) Service requested: \_\_\_\_\_

5) Explanation for request: \_\_\_\_\_

6) a) Cost per hour: \_\_\_\_\_

b) Total estimated hours: \_\_\_\_\_

c) Total estimated cost: \_\_\_\_\_

7) Prevailing wage required  Prevailing wage not required  (check all that apply)

8) Approximate duration: From \_\_\_\_\_, 20\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_

**THE UNDERSIGNED AGREES TO PROVIDE CERTIFIED PAYROLLS THROUGH THE  
LCP TRACKER SYSTEM FOR ALL EMPLOYEES WORKING ON THIS CONTRACT**

\_\_\_\_\_  
Service Provider (please print) Service Provider (signature) Date

\_\_\_\_\_  
Contractor (please print) Contractor (signature) Date

Recommended: \_\_\_\_\_  
Resident Engineer (signature) Date

Approved: \_\_\_\_\_  
Contract Compliance Officer (signature) Date

cc: \_\_\_\_\_, Asst. Chief Construction Engineer  
\_\_\_\_\_, District Engineer  
\_\_\_\_\_, Asst. District Engineer