## **DEPARTMENT OF TRANSPORTATION**

DIVISION OF CONSTRUCTION
DISTRICT XX
ADDRESS
CITY, STATE ZIP
PHONE XXX-XXX-XXXX
FAX XXX-XXX-XXXX
TTY 711
www.dot.ca.gov



## NOTICE OF COMPLAINT STATUS DEPARTMENT OF INDUSTRIAL RELATIONS REFERRAL

[Date]

[Mr. or Ms. Complainant's Name] [Address] [City, ST ZIP]

Dear [Mr. or Ms. Complainant's Last Name]:

The Labor Compliance Program for the Department of Transportation (Caltrans) has concluded its investigation of your prevailing wage complaint against [Prime or Subcontractor's Name] for Caltrans contract number(s) [Contract #(s)]. The complaint was referred to the Department of Industrial Relations on [Date] for formal action against [Prime or Subcontractor's Name] and is still under review.

If you have any questions, please contact [Labor Compliance Officer's Name] at [Phone Number].

Sincerely,

## [NAME IN ALL CAPS]

(District # or Region Labor Compliance Manager or Officer)

c: [Name, Title, Office]

(These names appear on the original letter and all copies of the original letter. Anyone mentioned in the body of the letters should be listed in the copies.)