DEPARTMENT OF TRANSPORTATION
DIVISION OF CONSTRUCTION-LABOR COMPLIANCE
DISTRICT XX
ADDRESS
CITY, STATE ZIP
PHONE XXX-XXX-XXXX
FAX XXX-XXX-XXXX
TTY 711
districtX.payrolls@dot.ca.gov

Flex your power!
Be energy efficient!

NOTICE OF COMPLAINT CLOSED

[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 completed its investigation of your prevailing wage complaint against [Prime or Subcontractor's Name] on Caltrans contract number(s) [Contract #(s)]. The Labor Compliance Program concludes the following:

(Provide the explanation of the violations and resulting resolutions—that is, restitution and so forth—or explain why prevailing wages are not due and what brought you to that conclusion.)

Caltrans has concluded its investigation, and your complaint is now closed. If you have 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 letter should be listed in the copies.)