**Sample Request for Waiver of Liquidated Damages**

(Strongly encouraged for amounts less than or equal to $100.00 but applicable for any amount)

Date

Construction Company

Address

Sub-Contracting Company Name (if applicable)

Dear *[TDA Labor Compliance Specialist’s name]*:

This is a request for a waiver of the liquidated damages amount of$#### being charged against *[Construction Company’s name].*

***[Please add the following:***

1. ***List employee(s) showing what was paid and what was owed***
2. ***Payment Periods in question for each employee referencing the payroll number***
3. ***Confirmation of payment to the employee(s) and the amount paid***
4. ***The basis for requesting the waiver. (use 1), 2) or both grounds from below as applicable)]***

*[According to HUD Handbook 1344.1 and DOL Regulations: The only grounds for requesting a waiver or reduction are the following:* ***(1)*** *the computation of liquidated damages is incorrect, and/or* ***(2)*** *the violation occurred inadvertently notwithstanding the exercise of due care.]*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature of Prime Construction Contractor Representative (if different from the LSO)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature of City or County’s appointed LSO*