

**EXHIBIT 6-B**

**REQUEST FOR WAGE DETERMINATION**

(Date)

Montana Department of Commerce  
Community Development Division  
CDBG Program  
301 S. Park  
P.O. Box 200523  
Helena, MT 59620-0523

The (... name of grantee: City, Town or County of \_\_\_\_\_) is preparing to go to bid for a contract involving FY 200\_\_ Montana Community Development Block Grant (CDBG) funds. The project involves:

- ***(brief description of activities)***;
- ***(estimated amount)***; and
- ***(projected date of bid opening)***.

Please send us a copy of the current wage determination that will apply to this project.

Fifteen days prior to the bid opening I will contact you to confirm that the wage rate determination you have sent in response to this request is still current.

Sincerely,

(signature)

Typed Name , Labor Standards Officer  
Mailing Address  
Telephone and FAX Number  
E-mail Address