

## EMPLOYER DISCLOSURE STATEMENT: USE OF FOREIGN LABOR CONTRACTOR

**Instructions**: Pursuant to California Business and Professions Code § 9998.2, this disclosure statement must be completed by an employer using the services of a foreign labor contractor and submitted to the Labor Commissioner by email at <u>foreignlaborcon@dir.ca.gov</u> or by mail to: Labor Commissioner, Licensing & Registration Unit-FnLC, 1515 Clay Street, Suite 401, Oakland, CA 94612. Any amendments to this document must be submitted within fifteen (15) days of the change (please use Amended Employer Disclosure Statement form).

Employing Person's Full Legal Name:

All names under which Emplo	oying Person is doing	business as, or has	done business as, withi	in
the previous three (3) years:				

<u>Employing Person's contact information:</u> Current physical business address (number, street, city or town, county, state, zip code):

Preferred mailing address (if different):

Preferred email address: \_\_\_\_\_

Home address (if sole proprietor):

Foreign address, if applicable:

Main business phone number: \_\_\_\_\_

Mobile phone number:\_\_\_\_\_

## Employer's designated person to work with Foreign Labor Contractor:

Name and position: \_\_\_\_\_

Current physical business address (number, street, city or town, county, state, zip code):

Preferred mailing address (if different):

Preferred email address:

Main business phone number: \_\_\_\_\_

Designated person's mobile phone number:\_\_\_\_\_

Employer's operational information:

Type of business operated by employer (specify industry and goods and/or services provided):

Physical address(es) of business location(s) where foreign guest workers will work:

Number of foreign guest workers that will perform labor for employer: \_\_\_\_\_

Time period during which foreign guest workers will perform labor for employer:

Visa classifications authorizing foreign guest workers who will perform labor for employer:

Name and brief description of positions to be filled by foreign guest workers:

Number of Foreign Labor Contractors employer will use to solicit or recruit foreign gue	st
vorkers:	

## Foreign Labor Contractor(s) involved in recruiting employees on behalf of the employer:

Name: \_\_\_\_\_

Current physical business address (number, street, city or town, county, state, zip code):

Mailing address (if different): \_\_\_\_\_

Email address: \_\_\_\_\_

Main business phone number: \_\_\_\_\_

Mobile phone number: \_\_\_\_\_

(If there are additional Foreign Labor Contractors who are recruiting employees on your behalf, please include contact information on a separate page.)

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I certify that	(EMPLOYING PERSON) will not
knowingly enter into an agreement for the services	of a foreign labor contractor that is not
registered under the Business and Profession Code	§ 9998.1.5.

(EMPLOYING PERSON), and/or \_\_\_\_\_\_ (EMPLOYING PERSON)'s designated agent for service of process has left the jurisdiction in which the action is commenced or otherwise has become unavailable to accept service.

Executed at	, California, this	day of	20
Signature:			
Print Name & Title:			