

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-	REGULATORY ACTION NUMBER 2014-0527-01FP	EMERGENCY NUMBER
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ENDORSED FILED IN THE OFFICE OF

2014 MAY 29 PM 2:05

2014 MAY 27 PM 4:56
OFFICE OF ADMINISTRATIVE LAW

Debra Bowen
DEBRA BOWEN
SECRETARY OF STATE

For use by Office of Administrative Law (OAL) only

NOTICE	REGULATIONS
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AGENCY WITH RULEMAKING AUTHORITY
Department of Justice, for the Department of Industrial Relations

AGENCY FILE NUMBER (if any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Department of Industrial Relations bond form	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	ADOPT
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	AMEND Article 18, section 48.6 Farm Labor Contractor Bond
TITLE(S) 11, Div. 1, Chapter 2	REPEAL

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input checked="" type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input checked="" type="checkbox"/> Other (Specify) <u>Revision of surety bond form</u>	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> \$100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify)
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify)		

7. CONTACT PERSON Karen W. Yiu	TELEPHONE NUMBER (415) 703-5385	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional)
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Karen Yiu</i>	DATE May 22, 2014
TYPED NAME AND TITLE OF SIGNATORY Karen W. Yiu, Deputy Attorney General	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

MAY 29 2014

Office of Administrative Law

Farm Labor Contractor Bond

KNOW ALL PERSONS BY THESE PRESENTS:

BOND NO. _____
(SURETY USE ONLY)

That we _____
(Full Name and Address of Legal Entity that is the Employer)

doing business as _____

a Farm Labor Contractor(s), as Principal, and _____
(Full Name and Address of Surety)

_____, a surety company qualified and admitted to do business in the State of California, as Surety, are held and firmly bound unto the People of the State of California, in the penal sum of

_____ dollars (\$_____)

lawful money of the United States of America, to be paid to the People of the State of California, for which payment we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

California Labor Code Section 1684(a)(3) requires that the Principal file with the Labor Commissioner a bond in a penal sum in the above amount based on the Principal's annual payroll for all employees. The condition of this obligation is that set forth in Labor Code Section 1684(a)(3) which provides that the above bounden Principal will comply with all terms and provisions of Chapter 3, Part 6, Division 2 of the California Labor Code and will pay all damages and any other monetary relief awarded as a result of a violation of the Labor Code occasioned to any person by failure to do so, or by any violation of the provisions of said chapter, or false statements of misrepresentations made in the procurement of the license. The bond shall also be payable for interest on wages and for any damages arising from violation of orders of the Industrial Welfare Commission, and for any other monetary relief awarded to an agricultural worker as a result of a violation of the Labor Code.

The bond is executed by the Surety hereunder to comply with Section 1684(a)(3) of the Labor Code and Chapter 2 (commencing with Section 995.010), Title 14, Part 2 of the Code of Civil Procedure and this bond shall be subject to all terms and provisions thereof. The Surety, its successors and assigns, agree they are jointly and severally liable on the obligations of the bond, the provisions of Chapter 2 (commencing with Section 995.010), Title 14, Part 2 of the Code of Civil Procedure, and Section 1684 of the Labor Code.

Pursuant to California Code of Civil Procedure Section 996.360(a) and (b), this bond shall remain in full force and effect for all liabilities incurred before, and for acts, omissions, or causes existing or which arose before, the cancellation or withdrawal. This bond shall be deemed continuous in form and shall remain in full force and effect throughout all succeeding license periods unless terminated or cancelled in the manner hereinafter provided.

The aggregate liability of the Surety on all claims shall not exceed the penal sum of this bond.

The bond may be cancelled by the Surety in accordance with Article 13 (commencing with Section 996.310), Chapter 2, Title 14, Part 2 of the Code of Civil Procedure.

The Principal and Surety may be served with notices, papers and other documents under Chapter 2 (commencing with Section 995.010), Title 14, Part 2 of the Code of Civil Procedure, at the addresses indicated above.

The effective date of this bond is _____.

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct and that I have executed the foregoing bond under an unrevoked power of attorney. Executed at _____.

IN WITNESS THEREOF, the said Principal and Surety have hereunto set their hands and seals this _____ day of _____, 20_____.

(If a corporation, two officers sign below)

(If an individual, sign below. If a partnership, all partners sign below. If a LLC, managing member sign below)

A CORPORATION PRINCIPAL

PRINCIPAL

By: _____

(TITLE OF OFFICIAL)

By: _____

(TITLE OF OFFICIAL)

SURETY

(CORPORATE SEAL)

Attach certificate of acknowledgment of surety before a notary public

By: _____

(TITLE OF OFFICIAL)

NOTE: This bond is to be duly executed and filed with the State Labor Commissioner.

- Acknowledgement of Principal
- Acknowledgement of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

County of _____ ss

On _____ before me, _____

(here insert name and title of the officer), personally appeared _____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____ (Seal)

- Acknowledgement of Principal
- Acknowledgement of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

County of _____ ss

On _____ before me, _____

(here insert name and title of the officer), personally appeared _____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____ (Seal)

- Acknowledgement of Principal
- Acknowledgement of Surety (Attorney-In-Fact)

STATE OF CALIFORNIA

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WITNESS my hand and official seal.

Signature _____ (Seal)