Checklist to Complete Form 3

1. Forms 1 & 2

2. Staffing Plan or Employee List

3. Prevailing Wage Schedule (if applicable) or Employee Pay Rates

4. Paid Time Off for each Employee (if applicable)

5. Itemized list of Employee Benefits
   - “Fringe Benefits”/Payroll Taxes employee benefits exclusive of Article 9 supplemental benefits including but not limited to: FICA, Disability, Medical, Etc.
   - Prevailing Wage schedule with Article 9 Supplemental benefits

6. Insurance Costs
   - General Liability, Comprehensive Vehicle Liability, Data Breach- Include endorsement costs if applicable

7. Equipment Costs
   - Equipment Amortization Costs
   - Equipment Operating Costs
   - Supplies and/or Non-Amortized Equipment

8. Other Costs
   - Uniforms, background checks, Transportation, tolls, etc.

9. Overhead Costs

10. Preferred Source Fee = NYSID Fee = 4%

*Items listed in RED need back-up submitted with application