 **Compliance Plan**

**Receive Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2010 Blackfeet Tribal Employment Rights Ordinance and Safety Act of 2010 - Section 3-301 Title III: Compliance Plan. ‘TERO reserves a 20 day review period.’

**(T.E.R.O. Office Use Only)**

**“It is the intent of the Blackfeet Tribal Employment Rights Office (BTERO) to strictly**

**enforce the preference as set forth by the**

**Blackfeet Tribal Business Council.”**

Company Legal Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prime Contractor Sub-Contractor

Project Name and Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tribal Business License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Requesting Compliance\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FAILURE TO SUBMIT AN ACCEPTABLE COMPLIANCE PLAN WILL RESULT**

**IN NON COMPLIANCE AND EMPLOYER WILL BE DENIED THE RIGHT TO**

**COMMENCE BUSINESS WITHIN THE EXTERIOR BOUNDARIES**

**OF THE BLACKFEET INDIAN RESERVATION.**

**(For T.E.R.O. use only)**

**Reviewed by Compliance Officer Actual Sign Off Date \_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| Company Name/dba |  |
| Owner of Company |  |
| Project Supervisor Name |  |
| Mailing and Physical Address |  |
| Phone Number(s)/Fax Number |  |
| Email Address |  |
| DUNS#, SAM’S #, CAGE # & NAIC CODE |  |
| Website Information |  |
| **Scope of work: Narrative, descriptive**  **(please submit job description(s) that pertain to scope)**  **Start Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Prime Contractor/Sub-Contractor/Employer shall submit following reports to the B.T.E.R.O.**   1. Copy of Contract 2. Rate of Pay 3. Certified Payroll 4. New or Additional Employees 5. Disciplinary Report or Termination Notice 6. Employee Evaluation (TERO clients only) 7. Copy of photo ID’s for each employee 8. Job Descriptions for each position | |
| **Tribal Employment Rights Ordinance Fees (All fees due prior to commencing work)**  2010 Blackfeet Tribal Employment Rights Ordinance and Safety Act of 2010 - Section 2-201 Title II: Tribal Employment Rights Ordinance Fees. Please indicate the source of the funding below. Please make check or money orders payable to Blackfeet TERO. Mail to: Blackfeet TERO, P.O. Box 1889, Browning, MT 59417 | |
| **Federal** | **Total Amount $** |
| **State** | **Total Amount $** |
| **Tribal** | **Total Amount $** |
| **Other** | **Total Amount $** |

**Company Information**

**Immigrant Worker Control Act**

|  |  |  |  |
| --- | --- | --- | --- |
| The Blackfeet Tribal Employment Rights Ordinance and Safety Act of 2010 – Section 8-101: Immigration Work Visa System; The Blackfeet Tribal Employment Rights Office shall maintain a system for monitoring and enforcing this Ordinance as it relates to the immigration, admission and exclusion of all non-resident, non-tribal members entering the exterior boundaries of the Blackfeet Indian Reservation and conducting work activities therein. The Immigration Work Visa System shall include, but not be limited to, the following: sub-section A, B, C, D, E, and F. | | | |
| Worker(s) x Fee = Total | Weekly Fees ($25.00/employee) | Monthly Fees  ($75.00/employee) | Yearly Fees  ($150.00/employee) |
| Blackfeet(Exempt) |  |  |  |
| Descendant |  |  |  |
| Spouse Enrolled |  |  |  |
| Federally Recognized Tribal Member |  |  |  |
| Non-Member |  |  |  |
| Total Amount Owed |  |  |  |
| **Notice:** Registered immigrant workers shall be issued an Immigrant Worker Visa, which shall include their copy of their photo I.D. and visa expiration date, and must be carried at all times by the worker. | | | |

**Roster**

|  |  |  |  |
| --- | --- | --- | --- |
| Core Crew Definition: A member of the contractor’s crew, who is a regular, permanent employee and is in a supervisory position such that the employer would face a serious financial loss is that position were filled by a person who had not previously worked for that employer (Notice if needed, all certificates, degrees and years of experience must be provided to B.T.E.R.O. and submitted with Compliance Plan prior or, after work has commenced.) | | | |
| Name | Phone | Job Title | Enrollment Number |
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| **Goal:** The Employer or awarding contractor shall agree to a goal of 100% Indian Employment in those trades where there are qualified Indian workers available.  Percentage of Native American workers on project.  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%** | | | |

**Indian Preference in Contracting**

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| --- |
| The Blackfeet Tribal Employment Rights Ordinance and Safety Act of 2010 – Section 3-201: Indian Preference in Contracting; A.) All entities awarding contracts or subcontracts for supplies, services, labor, and materials where the majority of the work on the contract or subcontract will occur within the jurisdiction of the Blackfeet Tribe shall give preference in contracting and subcontracting to qualified Blackfeet firms that are certified by the Blackfeet Tribal Employment Rights Office as 51% or more Indian-owned and controlled. In the event bids are received from both certified and non-certified entities, the bid must be awarded to the Blackfeet entity submitting the lowest qualified entity, provided such bid is not more than ten (10%) percent higher than the lowest received. |

**Native American Sub-Contractors**

(Notice: All Sub-Contractors will file a separate Compliance Plan)

|  |  |  |
| --- | --- | --- |
| Company | Contact Person | Phone Number |
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**Non-Native American Sub-Contractors**

(Notice: All Sub-Contractors will file a separate Compliance Plan)

|  |  |  |
| --- | --- | --- |
| Company | Contact Person | Phone Number |
|  |  |  |
|  |  |  |
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|  |  |  |
| By signing this agreement, I (Company) agree to abide by all Blackfeet Tribal Employment Right Offices’ Ordinances and I (Company) agree to notify all my sub-contractors that they must file a separate Compliance Plan to the Blackfeet Tribal Employment Rights Office. I (Company) agree to notify the Blackfeet Tribal Employment Rights Office of any changes in person within forty-eight (48) hours and I (Company) will provide Indian Preference to all positions. Further, I (Company) understand that if my company and/or representative fails to comply with said Blackfeet Tribal Employment Rights Office Ordinances’, the Blackfeet Tribal Employment Rights Office will impose sanctions, fines, stop work orders and/or revocation of my Blackfeet Tribal Business License and Immigrant Work Visa Card which terminates my right to do business within the exterior boundaries of the Blackfeet Indian Reservation.  Employer(s) Signature (Please sign in the box thank you) Date | | |
| X | | |
| Assigned Compliance Officer: Date | | |