

CONTRACTING DEPARTMENT LIVING WAGE & PREVAILING WAGE/STANDARD COMPENSATION

WAGE-6

FY 2026

HARDSHIP WAIVER APPLICATION

If a contracting department seeks to award a contract to a vendor who claims complying with the Boston Jobs, Living Wage, and Prevailing Wage Ordinance (the “Ordinance”) would

- cause undue economic hardship,
- substantially curtail the service provided by the vendor, or
- have an adverse financial impact on the City,

the contracting department may request a hardship waiver by completing this **Hardship Waiver Application** and submitting it to the Living Wage Administrator (the Office of Labor Compliance and Worker Protections). In making the request, the contracting department should get the information from the vendor to complete the form.

Waivers shall be subject to the Office of Labor Compliance and Worker Protections approval after having held a public hearing on the request. **Hardship waivers will only be granted prior to entering into the contract.**

NOTES

Beneficiaries of assistance are **NOT** eligible to apply for a hardship waiver.

INSTRUCTIONS

Please print in ink or type all required information and submit it to the Office of Labor Compliance and Worker Protections. Hardship waivers may only be granted prior to entering into the contract.

PART 1. GENERAL INFORMATION

Contracting Department	
Contracting Dept. Contact Person	
Vendor Name	
Name of Program / Project	
Estimated Contract Amount	
Anticipated Start Date of Contract	
Anticipated End Date of Contract	

PART 2. BASIC INFORMATION

Use additional sheets of paper where necessary.

Please describe the purpose and functions of the contract and the types of jobs it will pay for:
Please provide a detailed explanation of why payment of the living wage or standard compensation will substantially curtail the services provided by a covered vendor or covered building service vendor:
Please provide a detailed explanation of why payment of the living wage or standard compensation will have an adverse financial impact or cause undue economic hardship. As part of your statement, please provide a detailed financial analysis of your position:
Please provide the number of employees impacted, an estimated hourly salary for each job, which will pay less than the living wage or standard compensation. Also, please explain the expected impact on the covered employees or covered building service employees if the living wage or standard compensation is waived.

PART 3. SIGNATURE

The following statement must be completed and signed by the Department Head of the contracting department.

Signature	
Position	
Date	