HOW TO CREATE & SUBMIT FORM ETA-9142B IN FLAG.DOL.GOV

June 6, 2019
Choose Application Type

**Form ETA-9141C**

**CW-1 Prevailing Wage**

File an application for a Prevailing Wage Determination to be used for a CW-1 Temporary Labor Certification.

**Create New**

**Form ETA-9142C**

**CW-1 Labor Certification**

File a CW-1 application for Temporary Labor Certification with the Chicago National Processing Center.

**Create New**

**Form ETA-9141**

**H-2B | H-1B | PERM Prevailing Wage**

File an application for a Prevailing Wage Determination.

**Create New**

**Form ETA-9142B**

**H-2B Labor Certification**

File an application for a H-2B Temporary Labor Certification.

More forms will be available to file through FLAG soon.
Preliminary Questions

Employers seeking H-2B workers must file a completed Application for Temporary Employment Certification (ETA Form 9142B and the appropriate appendices and valid PWD), a copy of the job order being submitted concurrently to the SWA serving the area of intended employment, and copies of all contracts and agreements with any agent and/or recruiter, executed in connection with the job opportunities.

Employers seeking a waiver of the time period for filing due to an emergency situation must submit a request for a waiver of the time period requirement, a completed Application for Temporary Employment Certification and the proposed job order identifying the SWA serving the area of intended employment, and must otherwise meet the filing requirements above.

Emergency Filing and your Prevailing Wage

F.b.11: Are you requesting a waiver of the period for filing this application (i.e., 90 to 75 days before the expected start date of work) due to an emergency situation under 20 CFR 655.17? •

☐ Yes
☐ No
Emergency Filing and your Prevailing Wage

F.b.11: Are you requesting a waiver of the period for filing this application (i.e., 90 to 75 days before the expected start date of work) due to an emergency situation under 20 CFR 655.17?

☐ Yes
☐ No

Form ETA 9141 Case Lookup

F.b.10/F.b.10a/F.b.10b: Locate your Form ETA-9141, Application for Prevailing Wage Determination (PWD) below.*

PWD Case Lookup

* If you do not have a relevant Form ETA-9141, Application for Prevailing Wage Determination, please complete one and return to this form once you have submitted.

You must link a Prevailing Wage determination.

Save & Quit
Continue
Form ETA 9141 Case Lookup

Locate your Form ETA-9141, Application for Prevailing Wage Determination (PWD) obtained for the job opportunity. (Use the search below to refine by Case Number, Employer Name, FEIN, Job Title or Determined SOC.)

<table>
<thead>
<tr>
<th>Case Number</th>
<th>Employer Name</th>
<th>FEIN</th>
<th>Job Title</th>
<th>Determined SOC</th>
<th>Determination Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>P-400-19155-059...</td>
<td>Legal Business N...</td>
<td>123456789</td>
<td>Butchers and Meat Poultry</td>
<td>51-3021.00</td>
<td>2019-06-04T20:35...</td>
</tr>
</tbody>
</table>

Click to select determined case

Click to search a Prevailing Wage submitted in iCERT
Here's your Requestor POC information from your Prevailing Wage determination:

**REQUESTOR POINT OF CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle</th>
<th>Account testing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact's Last (family) Name</td>
<td>First (given) Name</td>
<td>Middle Name(s)</td>
<td></td>
</tr>
<tr>
<td>Contact's Job Title</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Select how this should populate in your Temporary Labor Certification Application:

- **Employer Point of Contact**
  - 9142B Section D

- **Attorney/Agent Agreement**
  - 9142B Section E
Nature of H-2B Application

IMPORTANT: Employers and authorized preparers must read these instructions carefully before completing the Form ETA-9142B, H-2B Application for Temporary Employment Certification and Appendices A to D. These instructions contain full explanations of the questions and attestations that make up the Form ETA-9142B and Appendices A to D. In accordance with Federal Regulations, incomplete or obviously inaccurate applications will not be certified by the Department of Labor. Those items marked with an asterisk (*) are required and must be completed. Items marked with a section symbol ($) are conditional and must be completed if applicable.

Read more

Cap-Exempt Workers

A.1: Is the employer seeking to employ any H-2B workers under this application who will be exempt from the statutory numerical limit, or "cap," on the total number of foreign nationals who may be issued an H-2B visa or otherwise granted H-2B status? *

☐ Yes
☐ No
Temporary Need Information

B.1: Job Title

Job Title

B.2/B.3: SOC Code and Occupation Title

51-3021.00 - Butchers and Meat Cutters

B.4: Number of Workers

This field is required

B.5: Begin Date

This field is required

A completed Application for Temporary Employment Certification must be filed no more than 90 calendar days and no less than 75 calendar days prior to the begin date.
Temporary Need Information

B.8: The brief statement of temporary need must be provided in the space above, however, you may include one separate attachment where the allotted space is insufficient.
This information has been pre-populated from the 9141 case you selected in the Preliminary Questions section.
This information has been pre-populated from the 9141 case you selected in the Preliminary Questions section.
If Attorney or Agent is selected additional fields will be required below.
Job Opportunity and Minimum Requirements

Document Upload - SWA Job Order

F.a.1: You must upload the job order submitted concurrently to the State Workforce Agency (SWA) serving the area of intended employment.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded.

Drop files here or Browse

0_Doc2.docx  Clear

F.a.2: Name of the State *

VIRGINIA

F.a.3: Date Job Order Submitted *

05/22/2019
## Anticipated days and hours of work per week

*F.a.5 A-H: (an entry is required for each box below)*

<table>
<thead>
<tr>
<th>Day</th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total: 0 hours**

The entry in this field must be at least 35 hours per week.

---

## Hourly work schedule

*(an entry is required for each box below)*

1. **F.a.6a: Begin Time**
   
   [Blank box]

2. **F.a.6b: End Time**
   
   [Blank box]

---

## Education & Training
F.a.9: Work Experience: number of months required *

3

F.a.10: Supervision: does this position supervise the work of other employees? *

- Yes
- No

F.a.11: Special Requirements - List specific skills, licenses/certifications, field(s) of training, and requirements of the job.

specific requirements

21 / 4000 character limit
Place of Employment and Wage Information

Place of Employment

F.b.1: Worksite Address

Worksite address

F.b.2: Worksite Address (apartment/suite/floor and number)

F.b.3: City

City Test

F.b.4: State

VIRGINIA

F.b.5: Postal Code

2020989

F.b.6: County
Prevailing Wage Determination Information

F.b.10: 1st PWD Number Case Number
- P-400-19155-059597

F.b.10a: 2nd PWD Number Case Number

F.b.10b: 3rd PWD Number Case Number

Additional Worksites

F.c.1: Will work be performed at worksite locations other than the one identified above?
- Yes
- No
Other Material Terms and Conditions of the Job Offer

Daily Transportation

F.d.1: Workers will be provided with daily transportation to and from the worksite in compliance with all applicable Federal and Commonwealth laws and regulations. *

- Yes
- N/A

Overtime Available

F.d.2: Overtime hours will be available to the worker under this job offer and payable for every hour worked at the rate disclosed in this application.

- Yes
- N/A

This field is required

On-the-Job Training Available
On-the-Job Training Available

F.d.3: Workers will be provided with on-the-job training to perform the duties assigned.

- Yes
- N/A

Employer-Provided Tools and Equipment

F.d.4: Workers will be provided, without charge or deposit charge, all tools, supplies, and equipment required to perform the duties assigned.

- Yes
- N/A

Board, Lodging, or Other Facilities

F.d.5: Workers will be provided with board, lodging, or other facilities and/or the employer will assist workers in securing board, lodging, or other facilities.

- Yes
- N/A
equipment required to perform the duties assigned. *

- Yes
- N/A

Board, Lodging, or Other Facilities

F.d.5: Workers will be provided with board, lodging, or other facilities and/or the employer will assist workers in securing board, lodging, or other facilities. *

- Yes
- N/A

Deduction From Pay

F.d.6: State all deduction(s) from pay and, if known, the amount(s). *

None.

Save & Quit  Back  Continue
Recruitment Information

Two of three entries required *

F.e.1: Telephone Number to Apply

F.e.2: Email Address to Apply

F.e.3: Website Address (URL) to Apply

Save & Quit  Back  Continue
Based on your selection in G.1, certain application fields may not appear.

When Job Contractor – Joint Employer is selected, the Appendix D section will be required to complete.
G.2: Is the employer covered by the requirements of the Migrant and Seasonal Agricultural Workers Protection Act (MSPA) to obtain a Certificate of Registration? *

- Yes
- No
- N/A

**Document Upload - Employer MSPA**

You can upload a copy of the employer's current MSPA Certificate of Registration identifying the farm labor contracting activities the employer is authorized to perform attached to this application.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. *

Drop files here or **Browse**

**Document Upload - Job Contractor Agreement/Contract**

G.4: Because this application relates to Job Contractor - Joint Employer, confirm that the employer-client identified has read and agrees to all the applicable terms, assurances, and obligations contained in Appendix B and has attach a separate signed and dated copy of Appendix G with this application.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. *

Drop files here or **Browse**
The entry of Foreign Labor Recruiters will be completed in the Appendix C section.
Document Upload - Appendix B

H.1: Confirm that you have read and agree to all the applicable terms, assurances and obligations contained in Appendix B and attach a signed and dated copy of Appendix B.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. *(?)

Drop files here or Browse

Document Upload - Employer-client Appendix B

H.2: Because this application relates to Job Contractor - Joint Employer, confirm that the employer-client identified has read and agrees to all the applicable terms, assurances, and obligations contained in Appendix B and has attach a separate signed and dated copy of Appendix B with this application.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. *(?)

Drop files here or Browse
Preparer

Complete this section if the preparer of this application is a person other than the one identified in either Section D (employer point of contact) or section E (attorney or agent) of this application.

I.1: Last (family) name

I.2: First (given) name

I.3: Middle Initial

I.4: Law Firm/Business FEIN

I.5: Law Firm/Business Name
The need to complete Appendix A is determined by responses in prior application sections.

Appendix A - Multiple Worksites

Section Complete
Because you indicated that work is only being performed at one worksite (per Field F.c.1), no Appendix A is necessary for this application.

Please Note:
Applicants will upload Appendix B in Section G/H above.
The need to complete Appendix C is determined by responses in prior application sections. When G.5 is Yes, Appendix C will require Foreign Labor Recruitment Information to be entered.

Applicants will upload Appendix B in Section G/H above.

Please Note:
The need to complete Appendix D is determined by responses in prior application sections. When filing as a Job Contractor – Joint Employer, Appendix D will collect specific Employer-Client Information.
Application Documents

Below, you will find a summary of documents that you have uploaded to this application throughout the form. You may also add and categorize additional supplemental documents below.

Add Document

3 Additional Documents

You can modify documents which were added in previous application sections by returning to those sections.

<table>
<thead>
<tr>
<th>Document Name</th>
<th>Category</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>0_Doc2.docx</td>
<td>SWA Job Order</td>
<td>...</td>
</tr>
<tr>
<td>0_Doc2.docx</td>
<td>Employer MSPA</td>
<td>...</td>
</tr>
<tr>
<td>0_Doc2.docx</td>
<td>Appendix B</td>
<td>...</td>
</tr>
</tbody>
</table>