



**Attestation for Employers Seeking to Employ H-2B Nonimmigrant Workers
Under Section 105 of Division H of the Consolidated Appropriations Act, 2019
Public Law 116-6 (February 15, 2019)**

Form ETA-9142-B-CAA-3
U.S. Department of Labor

As an appendix to the approved Form ETA-9142B, *Application for Temporary Employment Certification*, and attached Form I-129, *Petition for a Nonimmigrant Worker*, and by virtue of my signature below, I hereby certify that the following is true and correct:

(A) I am an employer with an approved labor certification from the Department of Labor seeking permission to employ H-2B nonimmigrant workers for temporary employment in the United States.

(B) I was granted temporary labor certification from the Department of Labor (DOL) for my business's job opportunity, which required that the worker(s) ***begin employment before October 1, 2019***, and is currently valid.

(C) I attest that if my business cannot employ all the H-2B nonimmigrant workers requested on my Form I-129 petition before the end of this fiscal year (September 30, 2019) in the job opportunity certified by DOL, my business is likely to suffer irreparable harm (that is, permanent and severe financial loss).

(D) I attest that my business has a bona fide temporary need for all the H-2B nonimmigrant workers requested on the Form I-129 petition, consistent with 8 CFR 214.2(h)(6)(ii).

(E) I attest that each of the workers I request and/or instruct to apply for a visa under this petition, whether currently named or unnamed, have been issued an H-2B visa or were otherwise granted H-2B status during one of the last three (3) fiscal years (Fiscal years 2016, 2017 or 2018), consistent with 8 CFR 214.2(h)(6)(x).

(F) If I file this signed attestation and the Form I-129 petition 45 or more days after the start date of work shown on my temporary labor certification granted by DOL, I will complete a new assessment of the United States (U.S.) labor market in advance of H-2B nonimmigrant workers coming to the United States to begin employment before October 1, 2019, as follows:

1. I will place a new job order for the job opportunity with the State Workforce Agency (SWA) serving the area of intended employment that contains the job assurances and contents set forth in 20 CFR 655.18 for recruitment of U.S. workers at the place of employment for at least 5 days beginning not later than the next business day after submitting a petition for an H-2B nonimmigrant worker(s) and this accompanying attestation to U.S. Citizenship and Immigration Services;
2. I will place one newspaper advertisement, which may be published online or in print, on any day of the week, meeting the advertising requirements of 20 CFR 655.41, during the period of time the SWA is actively circulating the job order for intrastate clearance; and
3. I will offer the job to any qualified and available U.S. worker who applies or is referred for the job opportunity until 2 business days after the last date on which the job order is posted. I understand that consistent with 20 CFR 655.40(a), applicants can be rejected only for lawful job-related reasons.

(G) I agree to retain a copy of this signed attestation form along with evidence establishing that my business meets the standard described in paragraph (C) of this attestation, for a period of 3 years from the date of certification, consistent with the document retention requirements under 20 CFR 655.66, 20 CFR 655.56, and 29 CFR 503.17. Further, I agree to provide this documentation to a DHS or DOL official upon request.

(H) I agree to retain documentary evidence that each of the workers I am requesting on this H-2B petition, whether named or unnamed, are only workers who have been issued an H-2B visa or otherwise granted H-2B status during one of the last three (3) fiscal years (Fiscal Years 2016, 2017 or 2018), consistent with 8 CFR 214.2(h)(6)(x).

(I) I agree to comply with all assurances, obligations, and conditions of employment set forth in the *Application for Temporary Employment Certification* (Form ETA-9142B and Appendix B) certified by the DOL for my business's job opportunity.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct:

1. Name of hiring or designated official of the employer * (Last Name, First Name)	2. DOL Case Number *
3. Signature *	4. Date signed *

Public Burden Statement: Members of the public are not required to respond to this collection of information unless it displays a currently valid OMB control number. Obligations to reply are required (Immigration and Nationality Act, 8 U.S.C. 1101, et seq.). Public reporting burden for this collection of information, which is to assist with program management and to meet Congressional and statutory requirements is estimated to average 5.75 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed, and complete and review the collection of information. Members of the public may send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employment and Training Administration, Office of Foreign Labor Certification, 200 Constitution Ave., NW, Suite PPII 12-200, Washington, DC, 20210. (Paperwork Reduction Project OMB 1205- 0535) DO NOT send the completed attestation to this address.