

Iowa Division of Labor

Employment Agency Licensing

Mailing address: 1000 East Grand Avenue, Des Moines, IA 50319-0209

Physical address: 150 Des Moines Street, Des Moines, IA 50309 (Fed EX/UPS)

Phone: 515-725-5615

Fax: 515-281-7995

EAL@iwd.iowa.gov

www.iowadivisionoflabor.gov

Schedule of Fees Form PEA-2

Operating name of agency			
Address	City	State	Zip
The following is true and a correct schedule of fees to be charged to the applicant and collected in the operation of the employment agency:			

Signature(s) of licensee/applicant

Job title

Date signed

This schedule must be prominently posted at the place of business

All contracts and fee schedules must clearly state that the agency is licensed by the Labor Commissioner and inquires may be made via mail to the Iowa Division of Labor, 1000 East Grand Avenue, Des Moines, IA, 50319, or by telephone to 515-725-5615.

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Employment Agency Bond Form PEA-3

Bond #: _____

WHEREAS Iowa Code Chapter 94A requires that in most cases a person who for a fee brings together people desiring to employ and people desiring employment and who receives a fee, privilege, or other consideration directly or indirectly from an employee for the service is considered an employment agency.

WHEREAS Iowa Code Chapter 94A requires that an employment agency shall file with the Labor Commissioner a surety bond in the sum of \$30,000.00 conditioned to pay any damages that may accrue to any person due to a wrongful act or violation of law on the part of the employment agency.

THEREFORE, the Principal _____, doing business at

Employment agency name
_____, _____ Iowa
Address City

and _____
Surety

are held and firmly bound unto the people of the State of Iowa in the penal sum of \$30,000.00, for which payment we firmly bind ourselves, our heirs, our executors, our successors, our assigns, and our administrators, jointly and severally. If the Principal complies with all the provisions of Iowa Code Chapter 94A and the administrative rules adopted under its authority, and pays all damages caused by wrongful acts or omissions by the Principal, its agents, or its employees while acting within the scope of their employment, then this obligation is to be void. Otherwise, it is to remain in full force and effect until cancelled.

Executed this _____ day of _____, 20____.

Principal's signature

Surety's signature